Objective Standards Of Performance

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Introduction

This Appendix contains the performance objectives, criteria, and measures (POCMs) which are the components of the performance-based management system that the University and DOE will utilize for Laboratory oversight as described in Clause 2.6, Performance-Based Management. The POCMs will be clear and reasonable objective standards against which the University's overall compliance with obligations under this contract will be assessed.

The POCMs will be subject to annual review and may be modified by the agreement of the Parties in accordance with the procedures set forth in Clause 2.6, Performance-Based Management, Clause 5.1, Contract Modifications, and Clause 5.3, Program Performance Fee. It is understood that the changes in the POCMs may be proposed based on cost/risk/benefit analysis.

This Appendix contains a description of the process to be used by the University and DOE to evaluate the Contractor’s performance of administration, operations, science, and technology at the Laboratory.

Business systems may require modification as POCMs are revised in accordance with Clause 2.6, Performance-Based Management. Where systems are so modified in the course of a review period, DOE agrees to take such modification into account in the appraisal.

Section A - Science and Technology Self-Assessment

COMPONENTS OF PERFORMANCE EVALUATION PROCESS

The UC evaluation of science and technology is based on a combination of peer review and self-assessment by the laboratories. The UC President's Council on the National Laboratories, in collaboration with its Science and Technology Panel, evaluates annually the quality of science and technology at each Laboratory. For its evaluation, the Council utilizes input from external peer review committees established for each division and the Laboratory's self assessment. The Council's evaluation also includes an assessment of Laboratory management and institutional issues, which is based on its own analysis and the lab's self-assessment. The peer review committees base their evaluations on the following four criteria as appropriate:

- Quality of Science - Recognized indicators of excellence, including impact of scientific contributions, leadership in the scientific community, innovativeness, and sustained achievement will be assessed as appropriate. Other performance measures such as publications, citations, and awards may be considered.

- Relevance to National Needs and Agency Missions The impact of Laboratory research and development on the mission needs of the Department of Energy and other agencies funding the programs will be assessed in the reviews. Such considerations include national security, energy policy, economic competitiveness, and national environmental goals, as well as the goals of DOE and other Laboratory funding agencies in advancing fundamental science and strengthening science education. The primary mission of the Defense Program laboratories is to support National Security. The impact of Laboratory programs on National Security is of principal importance for this assessment element. The assessment may also consider the relevance and impact of Laboratory research programs on national technology needs. As appropriate, additional consideration will be given to performance measures such as licenses and patents, collaborative agreements with industry, and the value of commercial spin-offs.

- Performance in the Technical Development and Operation of Major Research Facilities - Performance measures include success in meeting scientific and technical objectives, technical performance specifications, and user availability goals. Other considerations may include the quality of user science performed, extent of user participation and user satisfaction, operational reliability and efficiency, and effectiveness of planning for future improvements, recognizing that DOE programmatic needs are considered to be primary when balanced against user goals and user satisfaction.

- Programmatic Performance and Planning The assessment should focus on broad programmatic goals, including meeting established technical milestones, carrying out work within budget and on schedule, satisfying the sponsors, providing cost-effective performance, planning for orderly completion or continuation of the programs, and appropriate publication and dissemination of scientific and technical information. In assessing the effectiveness of programmatic and strategic planning, the reviewers may consider the ability to execute projects in concert with overall mission objectives, programmatic responsiveness to changes in scope or technical perspective, and strategic responsiveness to new research missions and emerging national needs. In the evaluation of the effectiveness of programmatic management, consideration may include morale, quality of leadership, effectiveness in managing scientific resources (including effectiveness in mobilizing interdisciplinary teams), effectiveness of organization, and efficiency of facility operations.

- Because of the size and breadth of most Laboratory divisions, it is in many cases not possible (or desirable) to review all components annually. Instead, each Laboratory has developed review schedules appropriate for each division to assure review of all division components at least on a three-year cycle.

- Each Laboratory prepares an annual self-assessment of its performance in science and technology that utilizes the peer reviews of each division. In addition, each lab will prepare a brief summary self-assessment of its programmatic performance on the major program elements outlined in Appendix E, Statement of Work. The summary self-assessment will address any areas previously agreed upon with the appropriate DOE office and approved by the contracting officer. The summary self assessment may also include the above four criteria that are appropriate to the assessed programmatic work. The self assessment will also identify and track scientific and technical information reporting requirements. A schedule will be developed in collaboration with the DOE to phase in the programmatic self-assessments such that all major program elements will be assessed a minimum of every three years.

Section B - Performance Objectives, Criteria and Measures for Operations & Administration

Part I - Laboratory Management

Performance Objective #1 Laboratory Leadership

Laboratory leadership, in support of Laboratory missions, ensures the stewardship and viability of the institution. **(Weight = LANL 70% LBNL/LLNL 100%)**

Criteria:	Performance Measures:
1.1 **Institutional Stewardship and Viability** Evaluation of Laboratory senior management's approach, deployment and results for ensuring that the institution is capable of executing its current and future missions. **Weight = 70%)**	1.1.a **Planning:** Evaluation of management's approach for strategic planning that aligns Laboratory missions, core competencies, strategic direction, and funding sources with DOE strategic plans and objectives. The assessment will focus on achievement of the key objectives contained in the Laboratory's plans and how this information is reviewed with DOE. **(Weight = 11.6%(LANL); LBNL/LLNL 16.6%)** Weighting for Approach/Deployment and Results: **A/D = 40%** **R = 60%** Gradients (see attachment) Agreement: LANL specific - Evaluation to include relevant aspects of this measure to the transition of the new Laboratory Director (A/D only) 1.1.b **Establishing and Communicating Performance Expectations** Evaluation of management's effectiveness in establishing and communicating performance expectations. Assessment will focus on communication with Laboratory line management and senior management at the DOE Headquarters, Operations Office, and UC that reinforces performance goals. (**Weight = 11.6%(LANL); LBNL/LLNL 16.6%)**

Weighting for Approach/Deployment and Results:
A/D = 40%
R = 60%
Gradients (see attachment)

Agreement: LANL specific - Evaluation to include relevant aspects of this measure to the transition of the new Laboratory Director (A/D only)

Performance Measures:

1.1.c **Stewardship of Assets**
Evaluation of Laboratory management systems for making decisions that address stewardship of programmatic and institutional assets. Assessment will include the impact of planning on decision making , the use of prioritization processes, asset management, resource allocation, etc.
(Weight = 11.6%(LANL); LBNL/LLNL 16.6%)

Weighting for Approach/Deployment and Results:
A/D = 40%
R = 60%
Gradients (see attachment)

1.1.d **Effective Resource Management**
Evaluation of management's efforts to effectively manage funding and staff resources consistent with DOE and Laboratory goals. Assessment will focus on performance results which may include improvements in cost effectiveness such as the ratio of S&T to A&O staff, and other productivity or re-engineering indicators.
(Weight = 11.6%(LANL); LBNL/LLNL 16.6%)

Weighting for Approach/Deployment and Results:
A/D = 40%
R = 60%
Gradients (see attachment)

Performance Measures:

1.1.e **Community Relations:**
Evaluation of management's awareness of public concern regarding Laboratory operations. Assessment will focus on management's effectiveness in addressing community issues in a proactive manner. **(Weight = 11.6%(LANL); LBNL/LLNL 16.6%)**

Weighting for Approach/Deployment and Results:
A/D = 40%
R = 60%
Gradients (see attachment)

Agreement: LANL specific - Evaluation factors to be considered under this Performance Measure will include the annual survey described in Clause 5.14 of the prime contract.

1.1.f **Accountability and Commitments**
Evidence that systems ensure major commitments are met and information on status is timely and complete and that these systems allow informed management action. **(Weight =11.6%(LANL); LBNL/LLNL 16.6%)**

Weighting for Approach/Deployment and Results:
A/D = 40%
R = 60%
Gradients (see attachment)

Agreement: LANL specific - Evaluation to include management's efforts to support implementation of:

- Integrated Safety Management,
- CMR Restart,
- Land Transfer support,
- S&S Ops. Office Survey corrective actions
- Accelerator Production of Tritium, and
- Annual Certification of the Stockpile

Performance Objective #2 Regional Economic Partnership in Northern New Mexico

LANL will develop (in concert with UC and DOE) an effective partnership with regional entities to enhance economic development and diversification.
(Weight = 30%)

This Performance Objective and Measure is LANL - specific

Criteria:	Performance Measures:
2.1 **Regional Economic Partnership:** Laboratory leadership establishes an effective program to partner with regional entities to enhance economic development and diversification. **(Weight = 100%)**	2.1.a **Regional Economic Partnership:** • Evaluation of the effectiveness of the Laboratory's contribution to regional efforts in economic development and diversification**.** Evaluation factors to be considered under this Performance Measure will include an evaluation of performance in the areas this performance measure include those described in Appendices J, M and N of the prime contract. **(Weight = 100% LANL ONLY)** Weighting for Approach/Deployment and Results: **A/D = 60%** **R = 40%** Gradients (see attachment)

Attachment
The performance expectation for each performance measure will use the scoring criteria indicated in Table 1 below. Each performance measure indicates the relative weights between the Approach/Deployment criteria and the Results criteria.

Table 1, Appraisal Scoring Guidelines for Laboratory Management

Narrative Rating	Score Range	Approach/Deployment	Results
Outstanding	90 - 100%	• a sound systematic approach, fully responsive to all requirements. • a very strong fact-based improvement process is a key management tool; strong refinement and integration - backed by excellent analysis. • approach is fully deployed without significant weaknesses or gaps in any areas or work units.	• current performance is excellent in most areas of importance to the key business requirements. • excellent performance levels in most areas. • strong evidence of industry and benchmark leadership demonstrated in many areas.
Excellent	80-9%	• a sound systematic approach, responsive to the overall purposes. • a fact-based improvement process is a key management tool; clear evidence of refinement and improved integration as a result of improvement cycles and analysis. • approach is well developed, with no major gaps; deployment may vary in some areas or work units.	• Current performance is good to excellent in most areas of importance to the key business requirements. • Most improvement trends and/or current performance levels are sustained. • many to most trends and/or current performance levels show areas of leadership and very good relative performance levels.
Good	70 - 79%	• a sound systematic approach, responsive to the primary requirements. • a fact-based improvement process in place in key areas; more emphasis is placed on improvement than on reaction to problems. • no major gaps in deployment, though some areas or work units may be in the very early stages of deployment.	• improvement trends and/or good performance levels reported for many to most areas of importance to the key business requirements. • no pattern of adverse trends and/or poor performance levels in areas of importance to the key business requirements. • some trends and/or current performance levels show areas of strength and/or good to very good relative performance levels.
Marginal/ Unsatisfactory	50 - 69%	• beginning of a systematic approach to the primary purposes. • early stages of a transition from reacting to problems to a general improvement orientation. • major gaps exist in deployment that would inhibit progress in achieving the primary purposes.	• early stages of developing; some improvements and/or early good performance level in a few areas.

Section B - Performance Objectives, Criteria and Measures for Operations & Administration

Part II - Operations

II - 1 Environmental Restoration and Waste Management

Effective Environmental Restoration Program
An effective Environmental Restoration Program will expeditiously and cost-effectively remediate contaminated sites in a manner that is protective of worker and public health and the environment and consistent with mutually agreed upon priorities based on funding levels.

Los Alamos National Laboratory
Environmental Restoration Project

Fiscal Year 1998 (FY98) Performance Measures

In achieving the goals set forth in the Performance Measure agreement, University of California/Los Alamos National Laboratory (UC/LANL) pledges to work with the US Department of Energy (DOE) to achieve the goals of the Environmental Restoration (ER) Project in the face of budgetary, programmatic, and regulatory uncertainty. The FY98 Performance Measures include quantitative and qualitative measures of performance based on a DOE-approved baseline and subsequent approved changes, and are consistent with Laboratory performance measure guidance. Credit for the accomplishment of the performance measures will be given when found to be acceptable by DOE.

General Assumptions

1. The performance measures are based on an ER Project budget of $60M for FY98. The numbers and schedules presented in each measure are based on the ER Project Baseline, dated September 26, 1997. The Baseline Change Proposal (BCP) process will be used to modify the ER Project baseline in response to budgetary and scope changes.
2. Quantitative performance measures A.1, A.2, A.3, and A.4 will have flags placed on them in the Baseline in order to easily identify, monitor and track performance against these measures. In addition to monthly reports to DOE as prescribed in the monthly Progress Tracking System (PTS) Report, these measures will also be tracked and reported in the quarterly monthly reviews with DOE as well as tracked and documented in the quarterly Baseline Performance Reports sent to DOE. Progress against quantitative performance measures A.5, A.6, and A.7, and the qualitative measures, will be reported to DOE as prescribed in the monthly PTS Report. These changes will take place when the ER Project Baseline is revised in accordance with the recent restructure. The baseline revision will be complete by March 31, 1998.
3. Changed conditions outside the control of the parties may require jointly approved modifications to these performance measures. Any modifications will be documented and signed by both parties.
4. All due dates dependent on parties external to UC will be subject to change if the external party(ies) requirements are not met.

5. DOE acceptance of a document means that the document is complete (all elements of the document are included as per current ER Project guidance/policy) and consistent with the scope of work (as documented in the baseline and the various clean up and sampling plans), and is approved by DOE-LAAO.
6. All work will be conducted according to the Risk Based Corrective Action Process.
7. In the event DOE-LAAO does not approve a submittal, the issue will be brought to the attention of the UC Environmental Management (EM) Program Manager and the DOE-LAAO Assistant Manager for Environment.
8. The performance measures ratings are based on the DOE-UC Agreement on Appendix F Rating Matrix as documented in the *University of California (UC) Contract Between The United States of America and The Regents of the University of California*, effective October 1, 1997. These ratings are presented in the following table.
9. For FY99, the baseline, which will incorporate the path forward for critical project elements, will be used to determine performance measures.

Table 1. Appendix F Rating Matrix

Numerical Range	Adjectival Description	Definition
100-90	Outstanding	Significantly exceeds the standard of performance; achieves noteworthy results; accomplishes very difficult tasks in a timely manner.
89-80	Excellent	Exceeds the standard of performance; although there may be room for improvement in some elements, better performance in all other elements offset this.
79-70	Good	Meets the standard of performance; assigned tasks are carried out in an acceptable manner – timely, efficiently, and economically. Deficiencies do not substantively affect performance.
69-60	Marginal	Below the standard of performance; deficiencies are such that management attention and corrective action are required.
<60	Unsatisfactory	Significantly below the standard of performance; deficiencies are serious, and may affect overall results; immediate senior management attention, and prompt corrective action is required.

Part A. Quantitative Measures

Functional Area A.1. No Further Action (NFA) recommendations for work performed in FY98.
Weight 15%

Unsatisfactory	Submit fewer than 19 potential release sites (PRSs) for NFA recommendation.
Marginal	Submit 19 PRSs for NFA recommendation in FY98.
Good	Submit 24 PRSs for NFA recommendation in FY98.
Excellent	Submit 29 PRSs for NFA recommendation in FY98.
Outstanding	Submit 34 PRSs for NFA recommendation in FY98.

Assumptions

1. The number of NFA recommendations to obtain a "good" rating is based on the number in the ER Project Baseline (see General Assumption 1) and a delta of ±20% from "good" for the other ratings.

2. The work performed in FY98 for NFA recommendations will include an evaluation of each PRS for human health risk, surface water [following the ER Project Administrative Procedure (AP) 4.5, *Evaluation of Potential Surface Water Concerns at Environmental Restoration Sites*], other applicable regulations and standards [following guidance received from the New Mexico Environment Department (NMED) regarding acceptance of NFA recommendations (Letter from Ed Kelley, Director Water and Waste Management Decisions to T.J. Taylor, DOE-LAAO and J. Jansen, LANL, Re: No Further Action Determinations Los Alamos National Laboratory NM0980010515, dated March 10, 1997], and an ecological risk evaluation [following Environmental Protection Agency Guidance (*Ecological Risk Assessment Guidance for Superfund: Process for Designing and Conducting Ecological Risk Assessments.* Interim Final Draft. USEPA 1997]. The human health risk assessment, surface water assessment, ecological risk evaluation, and applicable regulations and standards assessment will all lead to a no further action recommendation.

3. The NFA recommendations will follow the *Resource Conservation and Recovery Act (RCRA) Facility Investigation (RFI) Report Framework* Project Consistency Team (PCT) Policy (EM/ER:96-PCT-014), dated August 19, 1996, or as amended to reflect requirements as stated in (2) above, and documented in conjunction with DOE approval, or the *Final Reports for Voluntary Corrective Actions and Expedited Cleanups* PCT Policy (EM/ER:95-PCT-029, Rev.1) dated April 12, 1996, or as amended to reflect requirements as stated in (2) above, and documented in conjunction with DOE approval.

4. Credit for completion will be obtained when the NFA recommendation is submitted to the NMED for those PRSs listed in the Hazardous and Solid Waste Amendments (HSWA) Module to the Laboratory's RCRA Operating Permit. For those PRSs not listed in the HSWA Module, the NFA recommendation will be considered complete when the final report is submitted to and accepted by (following General Assumption 5) DOE-Los Alamos Area Office (LAAO). The report containing the NFA recommendation will be developed in conjunction with members of UC, contract personnel and members of DOE-LAAO. For those reports submitted to NMED, the report must receive approval from DOE-LAAO prior to submittal to NMED. The reports submitted to NMED will be submitted to DOE-LAAO at least ten working days before it is due to NMED (as documented in the ER Project Baseline dated September 26, 1997, or as amended and documented through a BCP). Those reports submitted only to DOE-LAAO will be submitted based on the schedule as documented in the ER Project Baseline dated September 26, 1997, or as amended and documented through a BCP.

Functional Area A.2. Continued work on No Further Action (NFA) recommendations from work conducted prior to FY98. Weight 13%

Unsatisfactory Submit fewer than 140 potential release sites (PRSs) for NFA recommendation in FY98 from previous years' work.

Marginal Submit 170 PRSs for NFA recommendation in FY98 from previous years' work.

Good Submit 200 PRSs for NFA recommendation in FY98 from previous years' work.

Excellent Submit 230 PRSs for NFA recommendation in FY98 from previous years' work.

Outstanding Submit 260 PRSs for NFA recommendation in FY98 from previous years' work.

Assumptions

1. The number of NFA recommendations to obtain a "good" rating is based on the number in the ER Project Baseline (see General Assumption 1).

2. The work performed in FY98 for NFA recommendations will include an evaluation of each PRS for surface water [following the ER Project Administrative Procedure (AP) 4.5, *Evaluation of Potential Surface Water Concerns at Environmental Restoration Sites*], other applicable regulations and standards [following guidance received from the New Mexico Environment Department (NMED) regarding acceptance of NFA recommendations (Letter from Ed Kelley, Director Water and Waste Management Decisions to T.J. Taylor, DOE-LAAO and J. Jansen, LANL, Re: No Further Action Determinations Los Alamos National Laboratory NM0980010515, dated March 10, 1997], and an ecological risk evaluation [following Environmental Protection Agency Guidance (*Ecological Risk Assessment Guidance for Superfund: Process for Designing and Conducting Ecological Risk Assessments.* Interim Final Draft. USEPA 1997]. The surface water assessment, applicable regulations and standards assessment and ecological risk evaluation will all lead to a final no further action recommendation.

3. The NFA recommendations will be documented in one or more reports by the end of FY98. This(ese) report(s) will list each PRS, the NFA criteria under which the PRS was recommended for NFA based on the human health evaluation (work conducted prior to FY98), document the results of the surface water screen, any other applicable regulations evaluation, and the ecological risk evaluation.

4. Credit for completion will be obtained when the NFA recommendation is submitted to the NMED for those PRSs listed in the HSWA Module to the Laboratory's RCRA Operating Permit. For those PRSs not listed in the HSWA Module, the NFA recommendation will be considered complete when the final report(s) is (are) submitted to and accepted by (following General Assumption 5) DOE-LAAO. For those reports submitted to NMED, the report must receive approval from DOE-LAAO prior to submittal to NMED. The report(s) submitted to NMED will be submitted to DOE-LAAO at least ten working days before the end of FY98 (as documented in the ER Project Baseline dated September 26, 1997, or as amended and documented through a BCP). Report(s) submitted only to DOE-LAAO will be submitted based on the schedule as documented in the ER Project Baseline dated September 26, 1997, or as amended and documented through a BCP.

Functional Area A.3. Decontamination and Decommissioning work performed in FY98. Weight 12%

Unsatisfactory	Decontaminate, decommission and submit reports on fewer than 3 structures.
Marginal	Submit reports on 3 structures decontaminated and decommissioned in FY98.
Good	Submit reports on 4 structures decontaminated and decommissioned in FY98.
Excellent	Submit reports on 5 structures decontaminated and decommissioned in FY98.
Outstanding	Submit reports on 6 structures decontaminated and decommissioned in FY98.

Assumptions

1. The number of NFA recommendations to obtain a “good” rating is based on the number in the ER Project Baseline (see General Assumption 1) and in increments of one structure from each previous rating for the other ratings.

2. The format for the reports submitted in FY98 will follow the same format as used for the Decontamination and Decommissioning Reports submitted in FY97 (or as mutually changed and documented by DOE and UC).

3. Credit for completion will be obtained when the final report(s) is (are) submitted to and accepted by (following General Assumption 5) DOE-LAAO.

Functional Area A.4. Canyons work performed in FY98. Weight 15%

Unsatisfactory Perform less than the requirements identified to achieve a rating of "marginal."

Marginal Conduct sampling in 7 reaches of canyons, complete installation of 3 alluvial aquifer wells, complete drilling on deep well R-9, and start drilling of deep well R-12 in FY98.

Good Conduct sampling and submit a report to DOE-LAAO on 9 reaches of canyons, complete installation of 5 alluvial aquifer wells, submit the Pajarito Canyon work plan to DOE-LAAO by September 16, 1998, and complete the drilling of deep wells R-9 and R-12 in FY98.

Excellent Conduct sampling and submit a report to DOE-LAAO on 9 reaches of canyons, begin the first phase of sampling on 3 additional reaches, complete the installation of 8 alluvial aquifer wells, submit the Pajarito Canyon work plan to DOE-LAAO by August 17, 1998, and complete the drilling deep wells R-9 and R-12 in FY98.

Outstanding Conduct sampling and submit a report to DOE-LAAO on 9 reaches of canyons, begin the first phase of sampling on 5 additional reaches, complete the installation of 10 alluvial aquifer wells, submit the Pajarito Canyon work plan to DOE-LAAO by July 17, 1998, complete the drilling of deep wells R-9 and R-12, and start (as defined by breaking ground) drilling deep well R-7 or another well as recommended by the Groundwater Integration Team and approved by UC and LAAO in FY98.

Assumptions

1. The format for the reports submitted in FY98 for will follow the RFI Report Framework or other guidance as mutually agreed upon and documented by UC and DOE-LAAO.

2. Credit for completion of the canyons sampling will be obtained when the final report(s) is (are) submitted to and accepted by DOE-LAAO. Credit for the first phase of sampling will be considered when the sampling is started. Credit for installation of the alluvial aquifer wells will be considered when the wells are completed and a well completion report has been submitted to and accepted by DOE-LAAO. Credit for completion of the Pajarito Canyon work plan will be upon submittal of the work plan to DOE-LAAO. Credit for completion of the deep wells will be when the wells are completed and a well completion report (or interim well completion report if the well is not to be completed, upon approval by DOE) has been submitted to and accepted by (following General Assumption 5) DOE-LAAO.

Functional Area A.5. Management and Technical Support Costs **Weight 4%**

Unsatisfactory UC/LANL ER Project Management/Technical Support costs exceed 14%/4%, respectively, of the total budget.

Marginal UC/LANL ER Project Management/Technical Support costs are less than or equal to 14%/4%, respectively, of the total budget.

Good UC/LANL ER Project Management/Technical Support costs are less than or equal to 12%/3%, respectively, of the total budget.

Excellent UC/LANL ER Project Management/Technical Support costs are less than or equal to 10%/2%, respectively, of the total budget.

Outstanding UC/LANL ER Project Management/Technical Support costs are less than or equal to 8%/2%, respectively, of the total budget.

Assumptions

1. Management costs are identified by activity elements in the DOE-AL Work Breakdown Structure Dictionary.
2. By March 13, 1998, UC will submit for DOE review and approval a listing of those accounting structure elements which comprise management and technical support. For details, refer to LANL Memorandum, Canepa to Taylor, dated March 13, 1998.
3. The costs will be based on actual data in the UC/LANL Financial Management Information System as reported in the Project Tracking System as of November 18, 1998.

Functional Area A.6. Remediation Cost Variance **Weight 5%**

Unsatisfactory UC/LANL ER Subproject actual costs are greater than 5% above the planned baseline costs.

Marginal UC/LANL ER Subproject actual costs are less than 5% above the planned baseline costs.

Good UC/LANL ER Subproject actual costs are less than 4% above the planned baseline costs.

Excellent UC/LANL ER Subproject actual costs are less than 3% above the planned baseline costs.

Outstanding UC/LANL ER Subproject actual costs are less than 2% above the planned baseline costs.

Assumptions

1. The baseline cost data is based on the ER Project Baseline submittal as of September 26, 1997, or as subsequently amended and documented through the Baseline Change Process (BCP).
2. The costs will be based on actual data in the UC/LANL Financial Management Information System as reported in the Project Tracking System as of November 18, 1998.

3. Subprojects are structures being decontaminated and decommissioned, potential release sites, or potential release site aggregates, and will be identified by UC/LANL for this measure by April 15, 1998. UC/LANL will perform the planned vs. actual cost analysis on the identified subprojects. DOE-LAAO will review and approve the proposed subprojects.

Functional Area A.7. Cost Variance for ER Project **(Weight = 5%)**

Unsatisfactory Cumulative end-of year variance is less than -6%.

Marginal Cumulative end-of year variance is between -3% and -6%.

Good Cumulative end-of year variance is between -3% and zero.

Excellent Cumulative end-of year variance is between zero and +3%.

Outstanding Cumulative end-of year variance is greater than +3%.

Assumptions

1. Cumulative cost variance is reported in the PTS Report for September, 1998. The emergency BCP process will be used when appropriate to ensure planned activities are included in the Baseline. Cost variance is defined by the equation CV = (BCWP - ACWP)/BCWP, where CV = cost variance, BCWP = budgeted cost of work performed, and ACWP = actual cost of work performed.

Part B. Qualitative Measures

The Qualitative Measures represent key project priorities and forward thinking that must be done to assure successful execution of DOE's plan *Accelerating Cleanup: Focus on 2006*. They include beginning strategic action on the corrective measures study/corrective measures implementation (CMS)/(CMI) process and evaluating engineered barrier caps as a valid presumptive remedy.

Functional Area B.1. Engineered Solution for Material Disposal Areas and Landfill Weight 12%

Functional Area B.1.a. Material Disposal Area AB at Technical Area (TA) 49 Weight 7%

This measure is intended to evaluate an engineered solution for remedial action at Areas 2, 2A, and 2B of MDA AB. If warranted, part of the solution may include emplacement of an engineered barrier cap. Negotiations with NMED may establish the process for proposing engineered solutions, especially for other MDAs. If an engineered barrier cap is necessary, this process may establish performance of the cap as a viable remedy for other MDAs.

The process, if successful, will result in a representative streamlined plan for all MDAs to be treated similarly starting in FY99. This process will result in a revised baseline framework and logic to integrate these MDAs.

Unsatisfactory The activities conducted in this area are less than that required to meet "marginal" performance.

Marginal Submit a Best Management Practice (BMP) Plan to DOE-LAAO by April 15, 1998, for Areas 2, 2A, and 2B (asphalt pad area of MDA AB) at TA-49. The BMP Plan will propose a method to control water running onto and possibly into and under the asphalt pad area, removal of the asphalt pad, and regrade the site, if required.

Good Submit the BMP Plan to DOE-LAAO by April 15, 1998, and begin field work by June 15, 1998, at Areas 2, 2A, and 2B of MDA AB to control the water run-on, remove the asphalt pad, and regrade the site, if required.

Excellent Complete the requirements as defined in "good", finish all field work required under the BMP Plan, and submit a BMP Report to DOE-LAAO by September 30, 1998.

Outstanding Complete the requirements as defined in "excellent" and use MDA AB as an example in negotiating with NMED to propose a process to streamline the CMS/CMI process for other MDAs to be treated similarly. The negotiations with NMED will include at least three meetings with NMED assuming NMED is available to meet with LANL personnel. A report describing the results of the negotiations will be documented and submitted to DOE-LAAO by September 30, 1998.

Assumptions

1. MDA AB is representative of other MDAs that are considered to be 1) non-retrievable due to high worker-risk, physical, or cost impracticability, and 2) low risk to environment.

2. The process described in "outstanding" will include such information as, e.g., the use of "High Performing Teams" (teams made up of UC, DOE, and NMED staff) to negotiate a streamlined process; how some activities may be sequenced to streamline the process; and the ultimate effect of the streamlining on the overall ER Project baseline.

Functional Area B.1.b. Los Alamos County Airport Landfill at Technical Area (TA) 73 Weight 5%

The Los Alamos County Airport Landfill will be part of the land transfer negotiations between DOE and Los Alamos County. The landfill is representative of other landfills that are considered to be non-retrievable due to high worker-risk, physical, or cost impracticability. This measure is intended to identify a process which will result in one CMS/CMI streamlined plan for all similar landfills. This process, if successful, will result in a revised baseline framework and logic to integrate these landfills.

Unsatisfactory	The activities conducted in this area are less than that required to meet "marginal" performance.
Marginal	Complete the field work (started prior to FY98) for the Los Alamos County Airport Landfill at TA-73 by September 30, 1998.
Good	Complete the field work and submit an RFI Report to DOE-LAAO which documents a proposed remedy for the Los Alamos County Airport Landfill by September 30, 1998.
Excellent	Complete the requirements as defined in "good" by August 31, 1998.
Outstanding	Complete the requirements as defined in "good" by July 31, 1998.

Functional Area B.2. Corrective Measures Study (CMS) Plan Implementation and Reporting Process. Weight 14%

Functional Area B.2.a. Corrective Measures Study Plan Implementation Weight 7%

The CMS/CMI process developed as part of this performance measure will be representative of other sites requiring a traditional CMS/ Corrective Measures Implementation (CMI) process. The CMS/CMI process will identify a proven risk/benefit and cost/benefit methodology to be adopted by the Project for other sites requiring the full CMS/CMI and, if successful, will result in a revised baseline framework and logic for other sites necessitating the full CMS/CMI process.

Unsatisfactory The activities conducted in this area are less than that required to meet "marginal" performance.

Marginal Submit a Corrective Measure Study (CMS) Plan to DOE-LAAO for the Technical Area (TA) 16, 260 outfall after September 12, 1998.

Good Submit a CMS Plan to DOE- LAAO for the Technical Area (TA) 16, 260 outfall by September 12, 1998.

Excellent Complete the requirements defined in "good" by August 12, 1998.

Outstanding Complete the requirements defined in "good' and start the CMS by September 30, 1998.

Assumptions

1. If NMED does not approve the CMS Plan within 60 calendar days of submittal, DOE-LAAO will authorize UC to start the CMS field work at risk.

Functional Area B.2.b. Corrective Measures Study Reporting Process Weight 7%

The traditional CMS/CMI process will be representative of other sites requiring a CMS/CMI and will be used for all other sites requiring the full CMS/CMI. The CMS/CMI process will require early interaction with NMED and will produce an established CMS Report Outline (to be adopted by the Project) utilizing Resource Conservation and Recovery Act (RCRA) corrective action plan general guidance. This process, if successful, will result in a revised baseline framework and logic for other sites necessitating the full CMS/CMI process.

Unsatisfactory The activities conducted in this area are less than that required to meet "marginal" performance.

Marginal Submit to DOE-LAAO an annotated process flow diagram to follow in implementing a CMS by September 30, 1998.

Good Submit to DOE-LAAO an annotated process flow diagram to follow in implementing a CMS and submit a CMS Report Outline to DOE-LAAO by September 30, 1998.

Excellent Complete the requirements defined in "good" by August 31, 1998.

Outstanding Complete the requirements defined in "good" by July 31, 1998.

Assumptions

1. UC will periodically discuss development of the process flow diagram and the CMS Report outline with NMED assuming NMED is available to meet with LANL personnel.

Functional Area B.3. UC/LANL Environmental Restoration (ER) Project Close-out Plan Weight 5%

Unsatisfactory The activities conducted in this area are less than that required to meet "marginal" performance.

Marginal Submit an annotated outline for the UC/LANL ER Project Close-out Plan to DOE-LAAO by May 8, 1998.

Good Submit an annotated outline for the UC/LANL ER Project Close-out Plan to DOE-LAAO by April 8, 1998.

Excellent Submit an annotated outline for the UC/LANL ER Project Close-out Plan to DOE-LAAO by April 8, 1998. Obtain DOE review comments on the annotated outline by May 8, 1998, and revise the annotated outline and complete four draft sections by August 1, 1998 (sections to be identified by DOE by May 8, 1998).

Outstanding Complete the requirements as defined in "excellent", obtain DOE review comments on the four draft sections (identified in "Exceeds" rating) by August 31, 1998, and submit a revision of the four sections to DOE-LAAO by September 30, 1998.

Assumptions

1. DOE-LAAO will provide the UC/LANL ER Project close-out plan outline guidance by December 8, 1997.
2. The UC/LANL ER Project Close-out Plan will follow the DOE-LAAO outline guidance. Any subsequent guidance provided by DOE-AL will be evaluated by DOE-LAAO, and additional guidance will be provided by DOE-LAAO, as appropriate.
3. Due dates will be subject to renegotiation upon receipt by UC of any late comments or guidance, additional comments or guidance, or change in direction from DOE-LAAO.

Effective Waste Management Program
An effective Waste Management Program provides cost-effective waste management services to the Laboratory while ensuring compliance with applicable local, State and Federal laws and regulations and preventing adverse impacts on worker health, public health and the environment.

Los Alamos National Laboratory
Waste Management Program
Fiscal Year 1998 Performance Measures

Purpose

The purpose of this document is to establish a set of performance measures shared by the Department of Energy (DOE) Los Alamos Area Office (LAAO) and the Los Alamos National Laboratory (LANL) Waste Management (WM) Program which establish expectations from a demanding customer to promote continuous productivity improvement and successful execution of the program in a manner consistent with DOE's six strategic goals of the Environmental Management Program.

Performance measures are based on the funding level and established priorities at the time of issuance, and must be revised if funding or priorities change significantly.

Functional Area 1:
Cost Effectiveness

Functional Area Weight Percent = 15

There are two metrics within this measure. First is a goal to improve overall cost effectiveness of routine waste management operations and management, as represented by the entire target WM FY 1998 Baseline budget of $55,810K. The second is a goal to reduce waste management facility costs in the WM FY 1998 Baseline.

Reductions in management costs achieved under the second portion of this measure can be counted toward meeting the overall cost effectiveness goal. Reductions in costs other than facility costs, achieved under the first portion of the measure, may not count against the second portion of the measure.

A. Improve Overall Cost Effectiveness

Performance Metric 1A Weight Percent = 10

Performance Gradient:

- **Good:** Compared to the approved baseline activities' costs and schedules, a demonstrated equivalency of planned and actual costs is achieved.
- **Excellent:** Compared to the approved baseline activities' costs and schedules, a demonstrated reduction of 3% in actual costs compared to planned costs is achieved.
- **Outstanding:** Compared to the approved baseline activities' costs and schedules, a demonstrated reduction of 6% in actual costs compared to planned costs is achieved.
- **Marginal:** Less than "Good" Performance.

Assumptions:

- Savings will be carried over to FY 1999 or applied to unfunded work scope in the FY 1998 Prioritization List (August 8, 1997) in the order shown, unless alternative work scope is submitted for approval by DOE/LAAO.
- The FY 1998 Baseline or equivalent work scope will be performed.
- Savings will be processed through Baseline Change Control for re-allocation.

B. Reduce Present and Long-Term Facility Management Costs
Performance Metric 1B Weight Percent = 5

For FY 1998, $14,641K of the total Waste Management Program (WMP) budget of $55,810K is identified as WM Facility Costs.

Performance Gradient:

- **Good:** Manage to approved FY 1998 baseline.

- **Excellent:** In addition to the level of performance for "Good", identify and institute changes during FY 1998 that reduce actual FY 1998 costs for WM Facilities by at least $725K (5% savings from the $14,641K identified as Facility Costs in the FY 1998 baseline).

- **Outstanding:** In addition to the level of performance for "Good", institute changes during FY 1998 that reduce actual FY 1998 Facility Costs by at least $1,500K (10% savings from the $14,641K identified as Facility Costs in the FY 1998 baseline).

- **Marginal:** Less than "Good" Performance.

Assumptions:
- There will be no changes in facility requirements by DOE or LANL during FY 1998 that have a major impact on costs for facility management; if these occur this performance measure will be renegotiated.
- Savings during FY 1998 will be carried over to FY 1999 or applied to unfunded work scope in the FY 1998 Prioritization List (August 8, 1997) in the order shown, unless alternative work scope is submitted for approval by DOE/LAAO.
- The FY 1998 Baseline or equivalent work scope will be performed.
- Savings will be processed through Baseline Change Control for re-allocation.

Functional Area 2:

New Mission Waste Support Services and Legacy Waste Work-Off
Functional Area 2 Weight Percent = 70

A. Mixed Low-Level Waste (MLLW) Work-Off and New Mission Waste Treatment
Performance Metric 2A Weight Percent = 15

The purpose of this measure is to monitor performance of treating LANL Site Treatment Plan (STP) MLLW and the accompanying transition to treating newly generated MLLW within regulatory required time frames to avoid inclusion in the STP. The schedule for the work-off of STP waste and newly generated MLLW is based on funding levels received in current and outyears.

Performance Gradient

- **Good:**

1. Submit annual update of Site Treatment Plan to NMED by March 31, 1998. Complete the treatment and disposal of 89 cubic meters of MLLW by September 30, 1998. This volume will contain both "legacy" and newly generated MLLW waste streams.

2. Fully characterize for treatment the following MLLW waste streams:
   * Lead Waste TBD = 51.4 cubic meters
   * Mercury Waste TBD = 18.3 cubic meters
   * Treatment Sludges = 12.0 cubic meters
     Water Reactives = 6.0 cubic meters

* Note: Characterization of these wastes is compliance driven and must be completed by September 30, 1998.

3. LANL and DOE/LAAO representatives will visit Lawrence Livermore National Laboratory (LLNL) to evaluate MLLW storage operations at LLNL to determine potential improvements and associated cost savings in MLLW operations at LANL. Potential improvements and associated cost savings will be identified before December 31, 1997. Potential improvements in MLLW storage operations that are identified will be implemented at LANL and associated cost savings will be reallocated to other activities in FY 1998 and future years.

4. LANL will manage MLLW generated by the Environmental Restoration (ER) Project in addition to the routine operational MLLW, and facilitate shipment of ER Project wastes for treatment and disposal.

- **Excellent:** Complete "Good" and treat and dispose of an additional 14 cubic meters of legacy and newly generated MLLW, of which 6.0 cubic meters is legacy water reactives MLLW (LA-W916). The total would be 103 cubic meters when combined with requirements for "Good" performance.

- **Outstanding:** Complete "Excellent" and treat and dispose of an additional 7 cubic meters of MLLW. The total would be 110 cubic meters when combined with requirements for "Good" performance.

- **Marginal:** Less than "Good" Performance.

Assumptions:
- Funding for the MLLW Program of $5,272K is received from DOE.
- The required MLLW treatment and disposal facilities are available to LANL.
- The ER Project will fund brokerage, characterization, transportation, and treatment and disposal of MLLW that it generates.

B. Transuranic (TRU) Waste Certification and Processing Performance Metric 2B Weight Percent = 15

The purpose of this measure is to track performance on LANL's implementation of its TRU Waste Program's project to: (1) work through existing TRU waste in storage, and (2) manage the new mission waste to complete processing, certification, and preparation for shipment of TRU waste to meet the schedules established by the National TRU Program Office;.

Performance Gradient:

1a. TRU Waste Certification Performance Metric Subelement 2Bia Weight Percent = 10

- **Good:** Characterize, certify, and load 194 cubic meters of debris-type TRU waste for shipment to the Waste Isolation Pilot Plant (WIPP) by September 30, 1998. Characterize all TRU waste from Pad 1 of the Transuranic Waste Inspectable Storage Project to meet requirements of the Waste Analysis Plan approved by the New Mexico Environment Department. Complete readiness of homogeneous TRU waste characterization systems in FY 1998 in order to gain certification authority from the DOE Carlsbad Area Office in FY 1999.

- **Excellent:** In addition to "Good," receive certification authority for homogeneous waste by September 30, 1998.

- **Outstanding:** In addition to "Good," characterize, certify, and load an additional 50 m^3 of debris-type TRU waste for shipment to the WIPP by September 30, 1998.

- **Marginal:** Less than "Good" Performance.

- **Assumptions:**
  - The DOE will provide TRUPACT-II containers on a timely basis as needed for shipment of 194 cubic meters of TRU waste, and will provide transportation of the TRU waste from LANL to the WIPP site.

  If DOE does not provide TRUPACT-II containers on a timely basis or provide transportation of the TRU waste from LANL to the WIPP site, certification of waste as "road ready" will satisfy this performance measure.
  - Funding for TRU waste characterization and certification of $9,027K is received from DOE.

ib. TRU Waste Processing Performance Metric Subelement 2Bib Weight Percent = 5

- **Good:** Process 150 m^3 of TRU waste with the intent of disposing of a portion of the volume as LLW.

- **Excellent:** In addition to "Good," process an additional 100 m^3 of TRU waste with the intent of disposing of a portion of the volume as LLW.

- **Outstanding:** In addition to "Good," process an additional 200 m^3 of TRU waste with the intent of disposing of a portion of the volume as LLW.

- **Marginal:** Less than "Good" Performance.

Assumptions:

- Funding of $557K for the TRU waste sort, segregate, and repackage project is received from DOE.
- The DOE Operational Readiness Review for the TRU waste sort, segregate, and repackage project is completed by April 30, 1998.

C. TWISP Retrieval Project Performance Metric 2C Weight Percent =10

The purpose of this measure is to monitor progress in meeting the New Mexico Environment Department's (NMED) schedule for retrieving TRU waste on Pads 1, 3 and 4 at Technical Area 54, Area G by December 4, 2003.

Performance Gradient:

- **Good:** Complete 100 percent of Pad 1 retrieval operations, complete drum venting of all containers, and place into inspectable storage inside storage domes by September 30, 1998. Ready to begin retrieval of Pad 4 by September 30, 1998. Note: Retrieval operations for Pad 4 were originally scheduled to begin March 1, 1999, at the earliest.

- **Excellent:** Complete 100 percent of Pad 1 retrieval operations by March 31, 1998. Complete drum venting of all containers, and place into inspectable storage inside storage domes by June 30, 1998. Retrieve 250 drums from Pad 4.

- **Outstanding:** Complete all required actions for "Excellent", with actual costs for activities equal to or less than $5,055K (90 per cent of the budgeted costs in the August 8, 1997, FY98 baseline submittal). Retrieve 500 drums from Pad 4.

- **Marginal**: Less than "Good" Performance.

Assumptions:
- Funding for the TWISP Retrieval Project of $5,617 K is received from DOE.

D. Radioactive Liquid Waste (RLW) Performance Metric 2D Weight Percent = 10

ia. On-line Analytical Capability Performance Metric Subelement 2Dia Weight Percent = 4%

- The purpose of this measure is to monitor performance of completing installation and cost of equipment to continuously monitor radioactive liquid influent into the Radioactive Liquid Waste Treatment Facility.

Performance Gradient

- **Good:** Complete equipment installation at budgeted cost of $255K.

- **Excellent:** Complete equipment installation at a cost of $230K (10 % less than budgeted).

- **Outstanding:** Complete equipment installation at a cost of $204K (20 % less than budgeted).

- **Marginal:** Less than "Good" Performance.

ib. Nitrate Compliance Performance Metric Subelement 2Dib Weight Percent = 6%

The purpose of this measure is to monitor performance of achieving compliance with the Nitrate Limit proposed in the Groundwater Discharge Plan budget for the liquid effluent from the Radioactive Liquid Waste Treatment Facility at TA-50, Building 1.

Performance Gradient

- **Good:** Complete upgrades and equipment operational for nitrate at budgeted FY 1997 cost of $1,500K.

- **Excellent:** Complete upgrades and equipment operational for nitrate at cost of $1,350K (10% less than budgeted cost).

- **Outstanding:** Complete upgrades and equipment operational for nitrate at cost of $1,200K (20% less than budgeted cost) or eliminate need for the installation of nitrate controls at TA-50, Building 1.

- **Marginal:** Less than “Good” Performance.

  Assumptions:
  - No regulatory changes;
  - Resource availability supports baseline schedule.

E. Low Level Waste (LLW) Metric 2E Weight Percent = 10

The purpose of this measure is to monitor performance of the Low Level Waste receipt and disposal operations, and measures being taken to verify that suspect LLW material is not contaminated and can be released for disposal at a sanitary waste landfill (Green is Clean).

Performance Gradient:

- **Good:**.

    1. Revise Waste Acceptance Criteria (WAC) for LLW to incorporate FY 1997 changes to the Performance Assessment (PA) by July 21, 1998.

    2. Finalize facility LLW Certification Program documentation by February 1, 1998.

    3. For Green is Clean, complete all LANL actions needed to obtain DOE permission and notification to the New Mexico Environment Department for material release limits. Facilities that generate 25 % of the LLW volume will implement Green is Clean programs.

    4. Establish capability to dispose of LLW off site.

- **Excellent:** In addition to "Good:"

    1. Revise Waste Acceptance Criteria (WAC) for LLW to incorporate FY 1997 changes to the Performance Assessment (PA) by March 1, 1998;

    2. Develop capability for LANL waste generators to submit LLW and TRU waste profile forms electronically; and

    3. Facilities that generate 50% of the LLW volume will implement Green is Clean programs.

- **Outstanding:** In addition to "Good:"

    1. Develop capability for LANL waste generators to submit Chemical and Hazardous waste profile forms electronically; and

    2. Facilities that generate 75% of the LLW volume will implement Green is Clean programs.

- **Marginal:** Less than "Good" Performance.

Assumptions:

- Funding for LLW disposal operations of $3,443K is received from DOE.
- Performance measures for Green is Clean are contingent on DOE approval of the proposed LANL release protocols as described in "Proposed Free-Release Verification Limits for Two Unregulated LANL Waste Streams," TD-54G-006, R.1.

F. Chemical and Hazardous Waste Metric 2F Weight Percent = 10

The purpose of this measure is to monitor the performance of the Hazardous and Chemical Waste Operations' treatment and disposal activities for

- Hazardous and chemical wastes;
- infectious/medical/biological wastes;
- asbestos;
- polychlorinated biphenyl (PCB) waste;
- administratively-controlled waste;
- classified waste.

Performance Gradient:

The performance measure for Hazardous and Chemical Waste is based on the cost to manage the volume of waste received for storage, treatment and disposal. Performance of "Good" is based on an expected volume of 806 cubic meters at a budgeted cost of $4,500K, with lower cost if less-than-projected waste volumes are received. Managing the waste at a lower unit cost than budgeted results in a higher rating of performance, as shown in the following table.

Waste Volume	$ in Thousands		
(m3)	**Good**	**Excellent**	**Outstanding**
700	4,171	3,954	3,737
750	4,326	4,093	3,861
800	4,481	4,233	3,985
806	4,500	4,250	4,000
850		4,372	4,109
900		4,512	4,233
950			4,356
1000			4,481

Assumptions:

- Funding for Hazardous and Chemical Waste treatment, storage, and disposal operations of $4,500K will be received from DOE, or waste volumes will decrease according to the above table.

Functional Area 3:

Upstream Treatment of Waste Functional Area 3 Weight Percent = 5

The purpose of this measure is to monitor UC's progress in reducing waste generation at LANL by treatment of the waste at the source of generation rather than managing as waste after it is received at the LANL waste management facilities.

Performance Gradient

- **Good:**

1. Vitrification: Develop and submit to DOE/LAAO a detailed schedule by November 15, 1997, for work to prepare the Plutonium Facility at TA-55 to install and operate a vitrification unit that is to be developed at the Idaho National Engineering and Environmental Laboratory in FY 1998. Achieve all major FY 1998 milestones identified in the schedule.

2. Glovebox treatment: Decontaminate four newly generated gloveboxes (approximately 20 m^3) from TRU waste to LLW.

3. Suspect LLW scrap metal recycling facility: Achieve initial operating capability for LLW scrap metal recycling facility by January 1, 1998.

4. Mixed low level waste lead decontamination validation: Remove decontaminatable lead from the MLLW Waste Acceptance Criteria by September 30, 1998.

Excellent:
Glovebox treatment: In addition to "Good," decontaminate an additional 20 m^3 from newly-generated TRU waste to LLW.

- **Marginal:** Less than "Good" Performance.

Assumptions:

- The vitrification unit is developed and delivered on schedule by the INEEL during FY 1998.
- Funding for upstream treatment of $2,077K will be received from DOE.

Functional Area 4:

Managerial AccomplishmentsFunctional Area 4 Weight Percent = 10

A. Project Controls System Performance Metric 4B Weight Percent = 2.5

Performance Gradient:

- **Good:** The FY 1998 Baseline work scope schedules and costs for the Waste Management Program are developed and maintained in the Primavera Project Controls System. The FY 1999 Baseline work scope for the Waste Management Program is developed in the Primavera Project Controls System.
- **Excellent:** Elements of long-range planning through FY2005 for the Waste Management Program are incorporated into the Primavera Project Controls System before September 30, 1998.
- **Outstanding:** Construction and installation cost and schedule for all years for multiyear projects in the Waste Management Program are incorporated into the Primavera Project Controls System before September 30, 1998.
- **Marginal:** Less than "Good" Performance.

B. Project Tracking System and Baseline Change Proposal Submittal Performance Metric 4B Weight Percent = 2.5

Performance Gradient:

- **Good:** The monthly PTS report and BCP log is submitted to DOE/AL on or before the 12th working day of the month.
- **Marginal:** Less than "Good" Performance.

C. Transition of Waste Management Program to Defense Programs Performance Metric 4C Weight Percent = 5

- **Meets Expectations:** A system for recharge to the generators of waste of the marginal costs for waste management is developed and in place by September 30, 1998.
- **Exceeds Expectations:** A system for recharge to the generators of waste of the marginal costs for waste management is developed and in place by July 31, 1998.
- **Far Exceeds Expectations:** A system for recharge to the generators of waste of the marginal costs for waste management is developed and in place by May 31, 1998.
- **Need Improvement:** Less than "Meets Expectations".

Section B - Performance Objectives, Criteria and Measures for Operations & Administration

Part II - Operations

II - 2 Environment, Safety & Health

Preamble

The Laboratory's goal is to accomplish its mission cost-effectively while striving for an injury-free workplace, minimizing waste streams and avoiding adverse impacts to the environment from its operations.

The following Performance Objective, Criteria and Measures are linked to the Guiding Principles and Key Functions of Integrated Safety Management. They include process oriented measures that are intended to assess key elements of the Laboratory's integrated safety management system. They also include total system outcome measures which are intended to be key indicators of the performance of the Laboratory's integrated safety management system as a whole.

Performance Objective #1

Do work safely - The Laboratory systematically integrates ES&H into management and work practice at all levels so that missions are accomplished while protecting the worker, the public and the environment.

Process Performance Measures (Weight = 40%)
Assumption: The Laboratory will provide a narrative, self-assessment for the following process measures which will be subjectively rated by UC and DOE.

Criteria:	Performance Measures:
1.1 **Management Defines the Scope of Work Such That** (ISMS Core Function #1): • Line management is directly responsible for protection of the public, the workers and the environment. (ISMS Principle #1). • Clear and unambiguous lines of authority and responsibility for ensuring safety shall be established and maintained at all organizational levels within the department and its contractors. (ISMS Principle #2)	1.1.a **Roles and Responsibilities** ES&H roles and responsibilities are clearly documented, communicated, and understood by all levels of employee's at LANL (includes subcontractors). This encompasses knowledge of LANL ES&H policies, goals, and objectives. Using a representative sample of personnel, an internal review will be performed to determine the effectiveness of this communication.

Criteria:

- Line and ES&H staff have authority and resources to carry out programmatic, operational, and ES&H considerations. Protecting the public, the workers, and the environment is a priority whenever activities are planned and performed. (ISMS Principle #4)

(Weight = 8%)

Performance Measures:

1.1.b **ES&H Accountability**
LANL holds all levels of management and employees accountable for ES&H activities through a penalty and rewards program. The program is documented, communicated to all employees, and effectively utilized by line management. Action taken through these programs will be tracked, trended, and communicated as appropriate.

1.1.c **Resource Planning and Integration**
ES&H resource planning is an integral part of the work planned and performed at LANL. It can be shown that management systems plan for ES&H needs effectively and prioritize ES&H work (funded vs. unfunded) during the rating period. A process is created at top Laboratory management levels to allow the identification and resolution of issues concerning ES&H priority implementation within institution/lines/programs.

1.1.d **Subcontractor Management**
Past ES&H performance of subcontractors, e.g. available total recordable incident rates, lost work day case rates, and experience modification rates, is taken into account in selection of subcontractors.

Criteria:	**Performance Measures:**
	LANL has a performance selection assessment process to provide for subcontractor management. LANL has a work control process for control of subcontractor work at LANL facilities. Subcontractors are required to report to LANL all occupational injuries, illnesses and environmental incidents that occur onsite
1.2 **Protection & Prevention Involves Analyzing the Hazards Such That:** (ISMS Core Function #2) Before work is performed, associated work hazards are evaluated and Laboratory administrative and engineering controls are established to provide adequate assurance that the workers, public and environment are protected from adverse consequences. (ISMS Principle # 5) **(Weight = 8%)**	1.2.a **Hazard Analysis** Laboratory Hazard Analysis systems are robust in identifying the appropriate hazards before work is performed. A review will be conducted of a selected set of Laboratory hazard analysis documents such as SOPs, experimental plans, RWPs, SWPs, and hazard analysis sections of Work Control documents. Adequacy of hazard identification and analysis will be determined.

Assumptions - (CMR only)

- Funding shall be obligated by the DOE for engineered upgrades to CMR safety systems identified in the CMR BIO and TSRs; prioritization of those upgrades and the schedule for release of funding shall be negotiated between the DOE and LANL in their meetings of March 25 and 26, 1998

good - (CMR only)

- Development by April15, 1998, of an implementation plan (integrated program plan) for the completion of funded engineered upgrades for systems which may include ventilation, fire protection, and public address/communications
- On-time completion of funded engineered upgrades identified in the integrated program plan and due during the performance period

excellent - (CMR only)

- Early completion of 5% of funded engineered upgrades identified in the integrated program plan and due during the performance period
- On-time completion of Integrated Safety Management implementation plan milestones due during the performance period for hazards analysis requirements associated with safe work practices and work control requirements

outstanding - (CMR only)

- Early completion of 10% of funded engineered upgrades identified in the integrated program plan and due during the performance period
  Meet all institutional hazards analysis requirements (i.e., implementation milestones) identified in safe work practices and work control requirements

Criteria:	Performance Measures:
	1.2.b **Health Hazard Analysis** The HHA baseline will be completed by October 31, 1997. The HHA baseline will be improved by completion of sampling for selected exposure ratings.
	1.2.c **Maintenance of Authorization Basis** The Laboratory will maintain a high quality Safety Analysis Program that results in safety basis documentation that is adequate for its intended purpose. The quality of safety analyses will be evaluated utilizing mutually agreed upon expectations documented in a memorandum of understanding between LANL and DOE. To ensure that operational changes in nuclear facilities are properly evaluated relative to the facility authorization basis and changes are appropriately authorized, USQDs will be sampled and evaluated using a screening tool agreed to by DOE/LAAO and LANL. The screening tool and the method for selecting USQDs to be evaluated will be agreed upon by October 1, 1997. If deficiencies in USQDs are identified, and the deficiency is subsequently and promptly ameliorated to the satisfaction of DOE, no penalty shall be assessed against this measure.
1.3 **Protection and Prevention Involves Developing and Implementing Controls Such That:** (ISMS Core Function #3) The controls to prevent and mitigate hazards are tailored to the hazards and the work being performed. (ISMS Principle # 6) **(Weight = 8%)**	1.3.a **Hazard Control** Utilizing the selected set of hazard analysis documents , the adequacy and effectiveness of hazard controls will be evaluated including the hierarchy of controls, i.e., substitution, engineering, administrative, and personal protective equipment.

Criteria:	Performance Measures:
	1.3.b **Emergency Preparedness** The Laboratory has a current emergency planning document which is reviewed annually and updated, if required, using input from facility safety programs and actual site incidents/events. Emergency drills and/or evacuations are conducted annually using credible scenarios based on actual materials present.
1.4 **Operational Requirements Guiding the Performance of Work Are Such That:** (ISMS Core Function #4) Personnel possess the experience, knowledge, skills and abilities to discharge their responsibilities (ISMS Principle #3). The conditions and requirements for operations to be initiated and conducted are established. (ISMS Principle #7) **(Weight = 8%)**	1.4.a **Work Control** Facility Work Control systems are defined, communicated, and implemented.

Assumptions - (CMR only)

- Implementation of an area work supervisor program is demonstrated through the assignment of personnel, definition of roles and responsibilities, and accountability for implementation of those roles and responsibilities

good - (CMR only)

- Plan-of-the-day meetings are implemented prior to April 1, 1998
- Area work supervisors are trained and in place prior to May 1, 1998
- Development of an implementation plan (integrated program plan) for meeting LANL work control requirements (LIRs 230-01-02.0, 230-03-01.2, 230-03-02.0, 240-01-01.0) prior to April 15, 1998
- Completion of funded work control milestones identified in the integrated program plan due during the performance period

excellent - (CMR only)

- Early completion (at least 30 days in advance of due date) of 25% of the funded work
  control milestones due during the performance period

outstanding -(CMR only)

- demonstration of full compliance with LANL work control requirements during the
- performance period

Criteria:	Performance Measures:
	1.4.b **Management Walkarounds** LANL Management Walkarounds periodically review the actual performance of work and address any deficiencies.
	1.4.c **Management of Training Programs** The Laboratory shall implement, according to schedule, an effective training implementation and development plan/schedule at designated nuclear facilities. TIM (Training Implementation Matrix) plan program dates are achieved on schedule or are rescheduled based upon rational documentation provided to and agreed upon by DOE prior to reaching commitment dates.
1.5 **Continuous Improvement to Achieve Excellence in ES&H is Accomplished Through Such Approaches As:** • Self-Assessment • Lessons Learned • Collaboration and Peer Review • Benchmarking key outcomes and processes to "Best in Class" in the private sector to establish cost effective performance goals • Improved understanding between DOE and the Laboratory (ISMS Core Function #5) **(Weight = 8%)**	1.5.a **Management Self-Assessment** Appropriate Divisions, Offices, JCI, and PTLA will perform a quarterly self-assessment of their ES&H performance. The analysis will utilize applicable ES&H information from Appendix F data, sources detailed in the Safety Self-Assessment LIR, UC corporate requirements, and lessons learned data. Examples include: • Appendix F Outcome Measure performance • Corrective action status • Findings from functional reviews, external and internal audits/appraisals. • Information gathered during management walkarounds.

Criteria:	Performance Measures:
	• Collective dose data vs. the ALARA program for those organizations with doses greater than 1 person-rem. • Data for radiological uptakes, skin and clothing contamination. • ORPS reports, root causes, and lessons learned for the quarter.
	1.5.b **Management of RCRA Self-Assessment Data** Data from the ESH Division RCRA compliance inspections will be part of the Division/Office quarterly written self-assessments. The self-assessments. The self- assessments will include a discussion of action taken to decrease the number of RCRA observations.

Total System Outcome Performance Measures
(Weight = 60%)

1.6 **System Outcome measures**
System outcome measures are linked to the process measures. System outcomes are used to drive process excellence.
(Weight = 60%)

1.6.a **Radiation Protection of Workers**
(Weight = 6%)
Routine Exposures

1.6.a1 Occupational radiation exposures are managed to assure that individual doses do not exceed specified limits. An effective ALARA (As Low As Reasonably Achievable) program is in place to manage collective dose.

Assumptions:

- The performance period is January 1, 1997 through December 31, 1997. For subsequent years, the measure negotiation period shall be adjusted to allow negotiation to be completed before January 1st of each year. The performance for the year shall be reviewed by UC and DOE after the end of the performance year.
- Data reported for this measure include all external and internal doses [Total Effective Dose Equivalent (TEDE)] that are considered expected routine exposures. Excluded from this measure are planned special exposures or exposures resulting from life- or property-saving activities. Also excluded are internal exposures [Committed Effective Dose Equivalent (CEDE)] that are the result of intakes arising from operational incidents of a random nature, e.g., accidental releases from primary containment systems.
- Doses reported include: (a) individual doses of 1 rem or more; and (b) the collective dose for organizations with ALARA dose goals. (Note: ALARA dose goals are set and tracked for all organizations with collective doses exceeding 1 person-rem in the previous performance period.)
- ALARA dose goals can be adjusted periodically throughout the performance period, based on changes in anticipated workload. Such adjustments are subject to challenge by and approval of the Laboratory's ALARA Steering Committee, which may include ex-officio representatives from DOE.

All monitored individuals are included in this measure.

Gradient:
Good:

- Any individual exceeding his/her lifetime dose limit (TEDE) is in an aggressive dose management program.
- No individual dose exceeds the Federal legal limit 5 rem (TEDE) in the performance period, except where the internal dose component of TEDE is the result of an operational incident of a random nature.
- The actual collective doses of at least 80% of the organizations being tracked have achieved their dose goals for the performance period.

Excellent:

- No individual exceeds his/her lifetime dose limit (TEDE) in the performance period
- No individual dose exceeds the DOE administrative limit (2 rem) in the performance period.
- The actual collective doses of at least 90% of the organizations have achieved their dose goals for the performance period.
- A process is developed for workload adjustment to normalize collective dose data to the work being performed.

Outstanding:

- No individual dose exceeds the applicable facility/organization limit in the performance period.
- Work adjusted collective dose indicates a downward trend.

Performance Measures:

1.6.a 2 **Radioactive Intakes**

Occupational internal exposures [Committed Effective Dose Equivalent (CEDE)] caused by intakes of radioactive material arising from operational incidents of a random nature, i.e., accidental releases from containment systems are tracked and trended.

Assumptions:

- The performance period is January 1, 1997 through December 31, 1997. For subsequent years, the measure negotiation period shall be adjusted to allow negotiation to be completed before January 1st of each year. The performance for the year shall be reviewed by UC and DOE after the end of the performance year.
- Data reported for this measure are the number of intakes of radioactive material resulting in committed effective doses (CEDE) of greater than or equal to 2 rem. [Note: Two rem is the sensitivity of Radiochemical Alpha Spectroscopy (RAS) methods. Internal exposures less then 2 rem as determined by Thermal Ionization Mass Spectroscopy (TIMS) will be tracked but will not apply to this measure. TIMS is approximately 40 times more sensitive than RAS and has only been used since January 1997. After an appropriate baseline development period, TIMS results will be incorporated into this measure.]
- Performance is evaluated relative to metrics that are indicative of the number of opportunities for exposure.
- All monitored individuals are included in this measure.

Gradient:

Good:

- The number of intakes greater than or equal to 2 rem occurring in the performance period does not exceed two.

Excellent:

- The number of intakes greater than or equal to 2 rem occurring in the performance period does not exceed one.
- The number of positive nasal contaminations, i.e., greater than or equal to 50 dpm either nostril, does not exceed 20.

Outstanding:

- No intakes of radioactive material greater than or equal to 2 rem occur during the performance period.
- The number of positive nasal contaminations, i.e., greater than or equal to 50 dpm either nostril, does not exceed 10.

Performance Measures:

1.6.b **Radiation Protection of the Public**
A program is in place to ensure radioactive emission levels do not exceed the EPA 10 millirem standard for air [40 CFR 61, subpart H], and to ensure radioactive emission levels do not exceed the DOE 100 millirem standard for all pathways [DOE 5400.5 Chap.2]. As a key part, monitoring and surveillance data will be collected and assessed, and action taken when appropriate.
(Weight = 6%)

Assumptions:

- For FY98, the performance period is July 1, 1997 through June 30, 1998.
- Current Eastgate site boundary MEI.
- The approved Hydrogeologic Workplan is funded at the level requested.
- Current levels of sampling and analysis continue and are fully funded.

Gradient:
Good:

- The Laboratory does not exceed the EPA 10 millirem standard for air [40 CFR 61].
- The Laboratory does not exceed the DOE 100 millirem all pathways standard [DOE 5400.5 Chap.2].
- Funded commitments in the approved Hydrogeologic Workplan scheduled during the performance year are met.
- Environmental surveillance data and dose estimates are reported to management annually.

Excellent:

- Available analytical data are evaluated and presented to management every 6 months.

Outstanding:

- Available analytical data are evaluated and presented to management every 3 months.

Performance Measures:

1.6.c **Exposure Prevention**
Exposure measurements that evaluate exposures to hazardous chemicals, physical agents (except ionizing radiation), and biological agents will be tracked. The goal is no exposures greater than Occupational Safety and Health (OSHA) Permissible Exposure Limits (PELs) or American Conference of Governmental Industrial Hygienists (ACGIH®) Threshold Limit Values (TLV®s).
(Weight = 6%)

- The performance period is July 1, 1997 through June 30, 1998.
- Measure also includes subcontractors to LANL.
- Engineering and administrative controls such as substitution, isolation, process change, ventilation, and work control will be used to control exposures. Respirators and hearing protection are the least desirable means of control, and shall only be used if effective engineering or administrative controls have been documented as "not feasible," or while they are being instituted (per the OSHA Field Inspection Reference Manual, Section 8, Chapter 4, section A.6).
- Personal sampling results are those obtained through industrial hygiene monitoring programs, including the Health Hazard Assessment Program.
- Overexposures are defined as those above the PEL or TLV®.
- If the utilization of all feasible controls fails to reduce the hazard below that specified in the standard, and if the respiratory protection or hearing protection is determined to be adequate, the protective equipment can then be legally utilized for complete protection.
- LANL has a consolidated institutional policy regarding the hierarchy of controls, i.e., substitution, engineering, administrative, personal protective equipment.
- The chemical exposure limits as defined by OSHA 29 CFR 1910, (PELs), and ACGIH® (TLV®s) will be used. The governing limit will be the one most conservative. Exposures related to transportation incidents before LANL has ownership of a chemical product are not included in this measure.

Gradient:
Good:
- Ninety-five percent of the IH monitoring program results are below the OSHA PEL or ACGIH® TLV®.

Excellent:
- Ninety-seven percent of IH monitoring program results are below the OSHA PEL or ACGIH® TLV®.

Outstanding:
- One hundred percent of IH monitoring program results are below the OSHA PEL or ACGIH® TLV®.

Performance Measures:

1.6.d **Accident Prevention**
To assess the quality and performance of the LANL Occupational Safety and Health Program, injury/illness case data will be collected and analyzed. The goal is to significantly reduce total recordable incident rate (TRI) and lost workday case rate (LWC) for the Laboratory.
(Weight = 6%)

Assumptions:

- For FY98, the performance period is July 1, 1997 to June 30, 1998.
- Injury/illness case data includes total OSHA total recordable incidents (TRI) and OSHA lost workday cases (LWC).
- UC employees, UC-contracted employees who report directly to a UC supervisor, PTLA, and JCI employees are included in this performance measure.
- By January 1, 1998 DOE and UC will benchmark injury/illness rates, set institutional goals, and readjust targets.

Gradient:
Good:

- The combined UC/JCI/PTLA TRI rate (calculated at 5.89 for calendar year 1996) shall decrease by at least 22 during the performance period.
- The combined UC/JCI/PTLA LWC rate (calculated at 3.87 for calendar year 1996) shall decrease by at least 33 during the performance period.

Excellent:

- The combined UC/JCI/PTLA TRI rate (calculated at 5.89 for calendar year 1996) shall decrease by at least 30 during the performance period.
- The combined UC/JCI/PTLA LWC rate (calculated at 3.87 for calendar year 1996) shall decrease by at least 40 during the performance period.

Outstanding:

- The combined UC/JCI/PTLA TRI rate (calculated at 5.89 for calendar year 1996) shall decrease by at least 40 during the performance period.
- The combined UC/JCI/PTLA LWC rate (calculated at 3.87 for calendar year 1996) shall decrease by at least 50 during the performance period.

Performance Measures:

1.6.e **Occupational Safety and Health Findings/Violations**
Deficiencies from Occupational Safety and Health standards are identified and effectively managed.
(Weight = 6%)

Assumptions:

- For FY98, the performance period is July 1, 1997 to June 30, 1998
- Terms are defined as follows:
  - **mitigated**: the deficiency has not been corrected, but corrective actions have been taken so that employees are no longer exposed to the hazard. Examples include: locking out equipment, or cutting a power cord on machinery with inadequate guarding.
  - **abated**: the deficiency has been corrected.
  - The terms imminent danger and serious are as defined in the OSHA Field Inspection Reference Manual:
  - **imminent danger**: any conditions or practices in any place of employment which are such that a danger exists which could reasonably be expected to cause death or serious physical harm immediately or before the imminence of such danger can be eliminated through the enforcement procedures otherwise provided by [the OSHA] Act.
  - **serious:** there is a substantial probability that death or serious physical harm could result from a condition which exists, or from one or more practices, means, methods, operations, or processes which have been adopted or are in use, in such place of employment unless the employer did not, and could not with the exercise of reasonable diligence, know of the presence of the violation.
  - **repeat deficiency**: a substantially similar condition (regardless of classification), i.e., an identical standard citation, or substantially similar hazardous condition that has occurred under the same conditions (i.e., same subcontractor or same area) as the initial deficiency.
- Deficiencies will be identified through a formal Laboratory occupational safety and health inspection process.
- Validation of categorization of imminent danger and serious deficiencies will be performed by ESH Division.
- A three-year baseline based on Laboratory institutional OSH deficiency tracking databases will be established. Trends in repeat deficiencies will be identified for construction and maintenance projects, and for other Laboratory operations.
- Abatement schedules can be modified with appropriate change control.

Gradient:

Good:

- Imminent danger and serious situations are mitigated or abated immediately.
- There is a decrease in the number of repeat deficiencies per hours worked for construction, maintenance projects, and Laboratory operations.
- Seventy percent of mitigated deficiencies are subsequently abated or closed out on schedule.

Excellent:

- Eighty percent of mitigated deficiencies are subsequently abated or closed out on schedule.

Outstanding:

- There are no repeat deficiencies during the performance period.
- Ninety percent of mitigated deficiencies are subsequently abated or closed out on schedule.

Performance Measures:

1.6.f **Routine Waste Minimization**
The Laboratory will reduce routine, average annual waste generation by 8% per year for Low Level (LLW), Mixed Low Level (MLLW), and Hazardous (HAZ) waste compared to CY 1993 routine waste generation. (Reference Secretary of Energy Memorandum, subject: Departmental Pollution Prevention Goals, May 1, 1996). **(Weight = 6%)**

Assumptions:

- The performance period is July 1, 1997, through June 30, 1998.
- Hazardous waste includes Resource Conservation and Recovery Act Hazardous (RCRA) waste, state-regulated hazardous waste, and Toxic Substances Control Act (TSCA) hazardous wastes.
- In the event of workload changes, greater than 10%, that significantly affect LLW, MLLW, or HAZ waste generation, the Laboratory will bring these workload changes to the attention of DOE and UC who will negotiate a measure adjustment.

Gradient:

Good:

- A greater than 8% average annual reduction of Laboratory-wide routine LLW, MLLW, and HAZ waste generation based on CY 1993 waste generation is achieved.

Excellent:

- A greater than 12% average annual reduction of Laboratory-wide routine LLW, MLLW, and HAZ waste generation based on CY 1993 waste generation is achieved.

Outstanding:

- A greater than 16% average annual reduction of Laboratory-wide routine LLW, MLLW, or HAZ waste generation and a greater than 8% reduction of such the other waste types based on CY 1993 waste generation is achieved.

Performance Measures:

1.6.g **Sanitary Waste Recycling/Reduction** Laboratory will maintain (or decrease) the annual aggregate weight of all routine solid sanitary waste and maintain (or increase) the fraction of sanitary waste which is recycled at the levels achieved in the 1997 performance period.
(Weight = 6%)

Assumptions:

- For FY98 the performance period is July 1, 1997, through June 30, 1998.
- Any actual or anticipated significant change in workloads will be brought to the attention of the UC and DOE as soon as possible and an appropriate change is to be made in this goal. Significant change should be interpreted to be a change of 10% (or more) in workload which would affect waste generation rates.
- Air emissions and sanitary wastewater are excluded.
- Purchase of the 29 EPA Affirmative Procurement Preference items will be monitored in order to set a baseline.
- Performance will be measured at the institution level.
- Paper from the Green is Clean Program will not be counted as sanitary waste generation.

Gradient:
Good:

- LANL will maintain the aggregate weight of all routine solid sanitary waste the 1997-performance-period levels.
- LANL will increase the fraction of sanitary waste recycled compared to total sanitary waste generation by greater than 76%.

Excellent:

- LANL will decrease the aggregate weight of all routine solid sanitary waste by greater than 3% compared to the 1997 performance period level.
- LANL will increase the fraction of sanitary waste recycled compared to total sanitary waste generation by greater than 78%.

Outstanding:

- LANL will decrease the aggregate weight of all routine solid sanitary waste by greater than 5% compared to the 1997 performance period level.
- LANL will increase the fraction of sanitary waste recycled compared to total sanitary waste generation by greater than 80%.

Performance Measures:

1.6.h **Environmental Performance**
Effective environmental performance will be appraised yearly. Tracking and trending is accomplished by evaluating the unweighted program scores.
(Weight = 6%)

Assumptions:

- For FY98, the performance period is July 1, 1997, through June 30, 1998.
- All uncontested violations and findings will be counted. Contested violations will be individually managed as appropriate.
- A goal of 100% effectiveness is assumed. The appraisal rating is the weighted sum of the selected environmental program scores. The selected environmental programs will each be rated by four factors, including (1) the number of environmental violations/findings resulting from inspections by regulatory agencies and DOE and formal audits; (2) the environmental harm caused or potentially caused by the violations; (3) the number of repeat violations since the last formal inspection/audit; and (4) the self-identification of problems that result in a finding or violation.
- The weighted percent counted in each program is subject to yearly negotiation. For FY98, the program scores are 50% for RCRA, 30% for NPDES, and 20% for OTHER programs (such as CAA, SDWA, UST, TSCA, etc.)
- Repeat violations will be defined by regulator policies.
- The formula for calculating the scores is specified in a memorandum of understanding between LANL and DOE.

Gradient:
Good:

- 70-79

Excellent:

- 80-89

Outstanding:

- 90-100

Performance Measures:

1.6.i **Regulatory Commitments**
All funded regulatory consent agreement milestones will be met. If such milestones cannot be met, the Laboratory must inform the DOE in writing at the earliest possible time before the milestone passes and seek written concurrence from the appropriate regulatory agency on a revised schedule. **(Weight = 6%)**

Assumptions:

- For FY 98 the performance period will be July 1, 1997, to June 30, 1998.
- CAA, CWA, and RCRA are equally weighted.

Gradient:

Good:

- 100% of milestones met.
- Requests generated by the Laboratory for written concurrence on a revised schedule are submitted at least 30 days prior to the due date.

Excellent:

- Good plus
- Accomplish milestones ahead of schedule as defined through dialogue with the local DOE office.
- 70% of the milestones are completed and submitted to the DOE for transmittal to the regulator at least 30 days in advance of the commitment.

Outstanding:

- Excellent plus
- 90% of the milestones are completed and submitted to the DOE for transmittal to the regulator at least 30 days in advance of the commitment.

Performance Measures:

1.6.j **Maintenance of the Authorization Basis**
The Laboratory operates its nuclear facilities within the facility's operating parameters defined by the technical safety requirements (TSRs) or the operating safety requirements (OSRs).
(Weight = 6%)

Assumptions:

- For FY98, the performance period is July 1, 1997 through June 30, 1998.
- For purposes of this performance measure, a TSR/OSR violation shall consist of any of the following:
  - Knowingly operating a facility in modes for which the Limiting Conditions for Operation (LCO) are not met.
  - Failure to enter appropriate action conditions and/or complete the associated required actions after discovery that an LCO is not met.
  - Failure to remove from service or declare inoperable any equipment or system for which operability cannot be demonstrated.
  - Failure to complete surveillance requirements within the specified period, including the 25% grace period.
- Any "as-found discrepant" condition that is both a positive USQ and a TSR/OSR violation shall be evaluated under the process section and shall not be considered a violation under this performance measure.

Gradient:

Good:

- 3 or fewer TSR/OSR violations

Excellent:

- 2 or fewer TSR/OSR violations

Outstanding:

- 1or fewer TSR/OSR violations

Assumptions - (CMR only)

- The CMR and TA-55 OSR violations pertaining to the calibration of equipment used for measuring ventilation hood flows shall be considered as a single OSR violation for the Laboratory.

good - (CMR only)

- On-time completion of funded milestones due during the performance period for the approved BIO and TSRs as listed in the integrated program plan and Safety Evaluation Report (SER)

excellent - (CMR only)

- Early completion of 10% of funded milestones due during the performance period for the approved BIO and TSRs as listed in the integrated program plan and Safety Evaluation Report (SER)

outstanding - (CMR only)

- Early completion of 25% of funded milestones due during the performance period for the approved BIO and TSRs as listed in the integrated program plan and Safety Evaluation Report (SER)

Section B - Performance Objectives, Criteria and Measures for Operations & Administration

Part II-Operations

II - 3 Facilities Management

Performance Objective #1 Real Property Management

The Laboratory will effectively manage Real Property.
(Weight = 5%)

Criteria:	Performance Measures:
1.1 **Real Property Management** Real property is effectively managed consistent with mission, requirements, and DOE direction. **(Weight = 5%)**	1.1.a **Program Implementation** Number of completed milestones/milestones scheduled for completion. **(Weight = 5%)**

Assumptions:
Intent is to measure the effectiveness, completeness, and timeliness of implementation of Real Property management actions. Milestones will be established in partnership with DOE and made a matter of record in the first month of the fiscal year. Milestones may be established for Facilities Information Management System completeness, office space utilization, substandard building space conversion, facility leases, etc.

Gradient:
Outstanding - 0.90
Excellent - 0.80
Good - 0.70
Marginal/Unsatisfactory - less than 0.70

Performance Objective #2 Physical Assets Planning

The Comprehensive Integrated Planning Process should reflect current and future Laboratory needs.
(Weight = 14%)

Criteria:	Performance Measures:
2.1 **Comprehensive Integrated Planning Process** The Laboratory develops, documents, and maintains a comprehensive integrated planning process that is aligned with DOE mission needs. **(Weight = 14%)**	2.1.a **Effectiveness of Planning Process** Assess how the planning process is executed to achieve maximum effectiveness in anticipating and articulating DOE and Laboratory needs. **(Weight = 14%)**

Assumptions:
The Laboratory will work with DOE counterparts in a cooperative effort to continuously evaluate the effectiveness of the comprehensive land-use planning process through the development of Laboratory specific planning elements. Site specific planning elements will be made a matter of record in the first month of the fiscal year.

Gradient:

Outstanding - 0.90
Excellent - 0.80
Good - 0.70
Marginal/Unsatisfactory - less than 0.70

Performance Objective #3 Project Management

The Laboratory will complete construction projects within approved budgets and schedules. **(Weight = 33%)**

Criteria:

3.1 **Construction Project Performance**
Construction projects greater than $500K (regardless of type of funds) achieve schedule, and performance objectives. **(Weight = 20%)**

Performance Measures:

3.1.a **Work Performed**
Number of milestones completed/number of milestones planned for completion. **(Weight = 20%)**

Assumptions:
The intent is to measure actual progress against that planned for the fiscal year and for the Laboratory to execute projects and cost project funds in a timely manner. A milestone list for all active projects will be negotiated with DOE and made a matter of record in the first month of the fiscal year. Only significant milestones will be listed, but each active project will have at least one milestone per year. By mutual agreement between the Laboratory and DOE, milestones may be weighted for significance and/or for late/early completion. Negotiated milestones are not to be interpreted as baseline change approval. Milestones must be consistent with either approved or proposed baselines. Completion is defined as Critical Decision 4, construction completion or beneficial occupancy, as mutually agreed.

Gradient: (LBNL/LLNL)
Outstanding - 1.00
Excellent - 0.90
Good - 0.80
Marginal/Unsatisfactory - less than 0.80

Gradient: (LANL)
Outstanding - 1.00
Excellent - 0.95
Good - 0.90%
Marginal/Unsatisfactory - less than 0.90

3.2 **Construction Project Cost**
Line-Item projects (including any project $2000K and over regardless of type of funds) meet cost baselines.
(Weight = 13%)

3.2.a **Total Estimated Cost (TEC)**
Estimated cost at completion for all active projects/performance baseline TEC for all active projects. **(Weight = 13%)**

Assumptions:
The intent is to measure Laboratory performance in executing projects within the approved TEC. The performance baseline is the original approved baseline adjusted for allowed cost or work scope changes. DOE determines whether cost or work changes are allowed. The method of calculating estimated cost at completion and how to handle contingency will be made a matter of record in the first month of the fiscal year. Disposition of pending Baseline Change Proposals, for the purposes of this measure, will be made by mutual agreement in the tenth month of the fiscal year. By mutual agreement between the Laboratory and DOE, projects may be weighted for significance.

Gradient:
Outstanding - 0.96
Excellent - 0.98
Good - 1.00
Marginal/Unsatisfactory - greater than 1.00

Criteria:

Performance Measures:

3.3 **Project Delivery Cost**
Project delivery costs for construction projects greater than $500K are managed effectively.
(Weight = 0%)

3.3.a **Design/Construction Services**
Total project delivery costs/total construction costs for construction projects.
(Weight = 0%)

Assumptions:
The intent is to measure project delivery costs as a percentage of estimated or actual construction costs. Projects to be measured are those with a TEC greater than $500K that are scheduled to complete design and/or construction in FY98. The intent is to measure completed design and construction services costs versus estimated or actual construction costs. Design and construction services costs will be calculated and tracked separately, but consolidated for reporting under this measure. Design services costs to be tracked will include all costs (including burdens, G&A, etc.) associated with the following: Titles I & II Design, Design/Engineering services, Design-phase Project Management, Laboratory Design Review & Support, and all other costs (costs not in one of these categories) directly associated with project design. Construction services costs will include all costs (including burdens, G&A, etc.) associated with the following: Title III Design/Engineering, Construction-phase Project/Construction Management, Construction-phase Laboratory Services & Support, and all other costs (costs not in one of these categories) directly associated with the construction phase of the candidate projects. A mutually agreed list of projects will be made a matter of record in the first month of the fiscal year. Measure not applicable to LBNL and LLNL.

Gradient:
Track and trend.

Performance Objective #4 Maintenance

The Laboratory will maintain capital assets to ensure reliable operations in a safe and cost-effective manner.
(Weight = 33%)

Criteria:	Performance Measures:
4.1 **Facility Management** Facility operations and maintenance are effectively managed consistent with mission, risks, and costs. **(Weight = 13%)**	4.1.a **Program Implementation** Sum of completion percentages for all milestones worked/milestones scheduled for completion. **(Weight = 13%)**

Assumptions:
Intent is to measure the effectiveness and timeliness of the Laboratory's facility maintenance program. A list of mutually agreed milestones will be made a matter of record in the first month of the fiscal year. For multiple-facility milestones, completion percentage will be an average of the completion percentages for each facility included in the milestone. High hazard and nuclear facilities milestones will be weighted for significance. At LANL, milestones will be established in partnership with the Facility Management Council. Maintenance Implementation Plan (MIP) milestones and remaining milestones of the Maintenance Program Milestones Agreement of July 1993 will be included in this measure.

Gradient:
Outstanding - 105%
Excellent - 100%
Good - 95%
Marginal/Unsatisfactory - less than 95%

4.2 **Maintenance Program** The facility maintenance program is effectively managed and performed. **(Weight = 20%)**	4.2.a **Maintenance Index** Calculate quality performance index based on EFCOG Maintenance Performance Indicators. **(Weight = 20%)**

Assumptions:
A composite index will be calculated using a weighted average for selected performance indicators. The list of performance indicators, and the calculation algorithm will be made a matter of record in the first month of the fiscal year. Performance gradient calculations will consider "Best-in-Class" for comparable Energy Facility Contractors Group (EFCOG) benchmarking participants and the EFCOG average for comparable activities/sites.

Gradient:
Outstanding - 1.00
Excellent - 0.90
Good - 0.80
Marginal/Unsatisfactory - less than 0.80

Performance Objective #5 Utilities/Energy Conservation

The Laboratory will maintain a reliable utility system and conserve energy. (Weight = 15%)

Criteria:	Performance Measures:
5.1 **Reliable Utility Service** Maintain reliable utility service. **(Weight = 8%)**	5.1.a **Utility Service** Total number of customer hours of utility service less the number of customer hours of unplanned outages/total customer hours. **(Weight = 8%)**

Assumptions:
Unplanned outages that are caused by occurrences outside the boundary of the Laboratory's utility system may be excluded. Utilities to be measured, with assigned weights will be made a matter of record in the first month of the fiscal year. Definition of "Customer Hours" will be defined separately for each utility measured. A 12-month running average will be reported.

Gradient: (LBNL/LLNL)
Outstanding - 99.995%
Excellent - 99.990%
Good - 99.982%
Marginal/Unsatisfactory - less than 99.982%

Gradient: (LANL)
Outstanding - 99.971%
Excellent - 99.941%
Good - 99.883%
Marginal/Unsatisfactory - less than 99.883%

5.2 **Energy Consumption** Effectively manage energy usage. **(Weight = 2%)**	5.2.a **Building Energy** The reduction in energy usage from FY85 levels in BTUs per gross square feet of building expressed as a percent of FY85 energy usage. **(Weight = 2%)**

Assumptions:
Reduction for FY98 interpolated from the DOE goal of a 30% reduction from FY85 levels by FY2005.

Gradient:
Outstanding - 25%
Excellent - 22%
Good - 19%
Marginal/Unsatisfactory - less than 19%

Criteria:	**Performance Measures:**
5.3 **Energy Management** Energy initiatives are managed consistent with a comprehensive energy management plan. **(Weight = 5%)**	5.3.a **Energy Goals** Energy goals accomplished/goals scheduled to be accomplished in accordance with the plan. **(Weight = 5%)**

Assumptions:
The energy management plan will be made a matter of record in the first month of the fiscal year. Areas to be addressed in the plan are: (1) surveys and inspections for identifying cost effective energy and water conservation measures, including completion of Comprehensive Facility Audits by March 2004, energy conservation in surplus facilities, identification of low cost opportunities and solar/renewable energy applications; (2) completion of FEMP funded studies within budget and within one year of funding; (3) progress toward installing all cost-effective energy and water conservation measures identified by Comprehensive Facility Audits, by January 2005: (4) completion of FEMP funded retrofit projects within schedule and within two years of funding; (5) design and construction of new buildings and building alterations according to federal energy Reports and building commissioning; (6) provisions for cost effective energy and water conservation in real property leases; (7) use of alternative project financing, including Energy Savings Performance Contracts and demand-side management programs; (8) energy management training; (9) employee awareness; and, (10) procurement of energy efficient and water saving products.

Gradient:
Outstanding - 0.95
Excellent - 0.85
Good - 0.75
Marginal/Unsatisfactory - less than 0.75

Note: Plans, lists, and milestones made a matter of record in the first month of the fiscal year may be revised during the year by mutual agreement between the Laboratory and DOE.

Section B - Performance Objectives, Criteria and Measures for Operations & Administration

Part II - Operations

II - 4 Safeguards and Security

Performance Objective #1 Protection of Assets
The Laboratory will conduct Safeguards and Security operations to ensure effective protection of national security interests, proprietary information, personnel, property and the general public.
(Weight = 65%)

Criteria:

1.1 **Protection of Nuclear Materials**
The nuclear materials safeguards and security program shall ensure that nuclear material is protected, is in its assigned location, that any unauthorized removal is detected, and response to anomalies is provided.
(Weight = 45%)

Performance Measures:

1.1.a.1 **MC&A Physical Inventory**
Percentage of time all items are in their stated location and correctly identified, as described in the gradients.
(Weight = LLNL-10%; LANL-5%)

Assumptions:

"Authorized Location" is defined by the organization and identified on MASS for LANL and on COMATS for LLNL. An "identified location" for LLNL is synonymous with "authorized location" as used by LANL.

The level of difficulty for LANL and LLNL gradients is equivalent, but the gradients are constructed to reflect differences in inventory operations.

"Correctly Identified" means an item label consisting of the material balance area (MBA), material type and lot identification, or as specified in the currently approved MBA operating procedure. The accounting system and label must agree to be considered correctly identified.

LLNL does a shut down inventory

LANL does a working inventory.

During a working inventory, items are allowed to move; therefore, the listing used by auditors may not coincide with the actual location of the item. This is acceptable so long as a transaction on MASS has been performed and the auditor verifies the new location for the item during the course of the inventory.

The time frame for locating items begins as soon as the first inventory attempt fails to locate the item.

Gradient:

LLNL Gradients

- Outstanding: 99.5 percent of the SNM items are in their identified location and correctly identified.
- Excellent: 99.3 percent of the SNM items are in their identified location and correctly identified.
- Good: 99.0 percent of the SNM items are in their identified location and correctly identified.

LANL Gradients

- Outstanding: 90+ points
- Excellent: 80 to 89 points
- Good: 70 to 79 points

	Items in Authorized Location 99.5%	Items in Authorized Location 99.3%	Items in Authorized Location 99.0%
Items Correctly Identified 99.5%	98	88	78
Items Correctly Identified 99.3%	95	85	75
Items Correctly Identified 99.0%	92	82	72

"Items in Authorized Location" is that percentage of SNM items in their authorized location on the first inventory attempt. "Items Correctly Identified" is that percentage of SNM items that are correctly identified. No credit for this measure will be given if an SNM item, Category III or higher, is lost from inventory. Loss of an item from inventory is determined at the conclusion of an MBA inventory (to include special inventories).

1.1.a.2 **MC&A Verification Measurements**
Demonstration of progress toward improvement in the verification measurement program in support of physical inventories
(Weight = 5% - LANL Only)

Assumptions:

Verification measurements are those in support of the physical inventory program. Items identified for verification measurements are predetermined based on a statistical analysis by the statistical sampling plan as approved by the DOE. Defects are determined based on documented statistical data (ie remeasurement database, measurement uncertainty, etc.)

Gradients:

- Outstanding: Number of verification measurements performed meet a 95% confidence that 90% of the measured items are without defects (95/90 sampling based on Protected Areas (PA) as separate populations).
- Excellent: 150 or greater verification measurements are performed during the rating period.
- Good: 80 or greater verification measurements are performed during the rating period (this number of verification measurements is the minimum number agreed to by the DOE Operations Office as an interim measure towards meeting the 95/90 goal).

Performance Measures:

1.1.b **Protected Area Intrusion Detection Capability**
Provide assurance that protected area intrusion detection systems will detect unauthorized penetration.
(Weight = 10%)

		Test Program Frequency	
		Annual	Semi-Annual
Probability of Detections Results	95%	40	44
	93-94%	30	34
	90-92%	20	24

Assumptions:

The intent of this measure is to ensure that the Laboratories meet minimum DOE requirements for maintaining a Probability of Detection (PD) of 90%, with a confidence level of 95%. Testing of the system is required annually. The 90% percent PD rate and annual test requirement are set forth in DOE Manual 5632.1C-1, Chapter VI, page 3, para 4.b.

Using the matrix above, a "Good" score of 20 points would be awarded by achieving a 90%-92% probability of detection (worth 10pts) and conducting the testing annually (worth 10 pts). Increasing the PD rate, or increasing the confidence in the system by conducting semi-annual tests, results in a higher score and greater assurance that the protected area intrusion detection system will detect unauthorized penetrations.

Gradient:

- Outstanding: 40 - 44 pts
- Excellent: 30 - 34 pts
- Good: 20 - 24 pts

Performance Measures:

1.1.c **Protected Area Entry Control System**
Entry control systems will ensure only authorized personnel enter protected area portals.
(Weight = 5%)

		Test Program Frequency	
		Annual	Semi-Annual
Probability of Detections Results	95%	40	44
	93-94%	30	34
	90-92%	20	24

Assumptions:

The intent of this measure is to ensure that the Laboratories meet minimum DOE requirements for maintaining a probability of Detection of 90%, with a confidence level of 95%. Testing of the system is required annually.

Using the matrix above, a "Good" score of 20 points would be awarded by achieving a 90%-92% probability of detection (worth 10pts) and conducting the testing annually (worth 10 pts). Increasing the PD rate, or increasing the confidence in the system by conducting semi-annual tests, results in a higher score and greater assurance that only authorized personnel enter protected area portals.

Gradient:

- Outstanding : 40 - 44 pts
- Excellent : 30 - 34 pts
- Good: 20 - 24 ptspts

1.1.d **Protective Force Alarm Response**
Protective Force response times to SNM alarms will be equal to or less than the calculated time contained in the Site Safeguards and Security Plan (SSSP) vulnerability assessment report.
(Weight = 10%)

Assumptions:

1. Alarm response times begin the moment that the alarm response notification is announced regardless of the method or means of making the announcement.
2. Alarm response elapsed times ends when the last required responding officer is in the required position as defined in the SSSP.
3. Only planned alarm response tests will be used to validate this performance measure.
4. DOE/Operations Office approved response force time(s), as identified in the approved SSSP vulnerability assessment report (or as approved separately by the DOE Operations Office), are the only time measurement(s) to be used in this measure.
5. Each laboratory will have specific alarm response scenarios with a specified individual response force time approved for each scenario.

   a. The total number of individual alarm response scenarios will vary according to site specific requirements of each laboratory and each scenario will be identified in the laboratory's approved SSSP vulnerability assessment report.

   b. The number of alarm responses attempted each year are unlimited after the minimum responses are conducted as required by DOE Order.

Gradient::

- Outstanding: The response time is met more than 95% of the time .
- Excellent: The response time is met 90-95% of the time.
- Good: The response time is met 80-89% of the time.

Performance Measures:

1.1.e **Protective Force Training and Performance**
The Protective Force will be trained to accomplish its assigned mission.
(Weight = 10%)

Assumptions:

Statistical sampling, at the 95% confidence level, of Protective Force personnel will be conducted annually. Assessments will use written examinations, oral interviews, limited scope performance tests, and task proficiency examinations to determine a competency rating for the mission requirement relating to Protective Force "Critical System Elements." Critical System Elements will be identified by each Laboratory and their local DOE Office. The Composite Competency Rating is the percent of Protective Force personnel passing the written examinations, oral interviews, limited scope performance tests, and task proficiency examinations.

This measure does not include engagement simulation system enhanced exercises.

Gradient:

- Outstanding: Performance tests and associated assessment techniques demonstrate a composite competency rating of 90% or higher.
- Excellent: Performance tests and associated assessment techniques demonstrate a composite competency rating of 80%-89%.
- Good: Performance tests and associated assessment techniques demonstrate a composite competency rating of 70%-79%.

Criteria:

1.2 **Protection of Classified Matter**
Protection programs shall protect and control classified matter from unauthorized access, removal, damage, or destruction through the integration of security equipment, procedures, protective forces, management and supervision into a total system using design basis threat policy and local threat guidance.
(Weight = 20%)

Performance Measures:

1.2.a **Unauthorized Disclosure of Classified Matter (Compromises) and Infractions**
The number of unauthorized disclosures resulting in unauthorized individuals gaining access to classified matter, and the number of infractions issued, will be maintained at or below the three-year rolling average.
(Weight = 10%)

Assumptions:

A compromise is determined as a result of an inquiry mandated and articulated in DOE O470.1 and DOE M471.2.

A three-year retrospective rolling average will be established using Laboratory statistics pertaining to unauthorized disclosure of classified matter and security infractions

Gradient:

- Outstanding: The number of compromises and infractions is 20% or more below the three- year rolling average.
- Excellent: The number of compromises and infractions is 10% or more below the three- year rolling average.

- Good: The number of compromises and infractions is no greater than the three-year rolling average

1.2.b **Classified Computing Programs**
Classified systems are re-accredited in a timely manner and operated consistent with accredited plans.
(Weight = 10%)

Gradient:

LANL Gradient:
- Outstanding: 90% +
- Excellent: 80-89%
- Good: 70-79%
- Marginal/Unsatisfactory: One or more systems not re-certified on-time

LLNL Gradient:
- Outstanding: In addition to re-accreditation, 30% of the accredited systems are inspected annually to insure configuration management and compliance with accredited plan. Any necessary corrective actions are completed within an agreed upon time.
- Excellent: In addition to re-accreditation, 15% of the accredited systems are inspected annually to insure configuration management and compliance with accredited plan. Any necessary corrective actions are completed within an agreed upon time.
- Good: All systems are re-accredited every three years or when there is a security significant change.

LANL scoring
The following point system will be used:

- Certification 90 Days Prior to Expiration = 3pts
- Certification 60 Days Prior to Expiration = 2pts
- Certification 30 Days Prior to Expiration = 1pts
- Certification Less than 30 Days Prior to Expiration = 0pts
-

The following ratio is to be calculated for an overall score:

assigned points (based on above point system)
total possible points (number of certifications X 3)

LANL Definitions
Expiration Date: The date the system will no longer be allowed to process classified without being re-accredited. This date is three years from the date of accreditation.

Certification Date: The date that Laboratory systems documentation and testing operations are complete, and the Laboratory Information Systems Security Site Manager has certified to DOE that the system meets all requirements.

Performance Objective #2 Assessments & Corrective Actions

To ensure continuous improvement, the Laboratory will conduct self assessments and implement corrective actions for self assessment and DOE identified findings, with the goal of timely and aggressive correction.
(Weight = 35%)

Criteria:

2.1 **Assessments**
The Safeguards and Security Program will be managed to ensure self-assessments of topical, sub-topical areas, and best management practices are completed.
(Weight = 15%)

Performance Measures:

2.1.a **Self Assessment Completion**
Percent of self-assessments completed in accordance with the schedules established in the formal self-assessment plans.
(Weight = 15%)

Assumptions:

The number of self-assessments completed are only significant as they relate to the schedules established in self-assessment.

Gradient:

- Outstanding: 90% - 100%
- Excellent: 80% - 89%
- Good: 70% - 79%

2.2 **Corrective Action Planning**
A deficiency management program will be in place to ensure corrective actions for discovered deficiencies are developed and completed in a timely fashion.
(Weight = 20%)

2.2.a **Corrective Action Plan Completion (DOE)**
Percent of on-schedule corrective action plans resulting from Operations Office findings.
(Weight = 10%)

Assumptions:

A corrective action plan will be considered completed at the time that the action is documented.

Operations Office findings include the results of HQ/DOE Office of Security Evaluations (OSE) inspections.

When a corrective action plan is dependent upon an action, (other than a validation), that must be completed by an outside agency that the laboratory has no direct control over the subject corrective action will not be tabulated as a part of the overall percentage.

If a corrective action plan has multiple milestones and the final milestone is scheduled for completion on a date beyond the assessment period, credit for the corrective action plan being on schedule will be awarded if the last milestone that is scheduled for completion during this assessment period has been completed on schedule.

Findings that have corrective action plans with milestones that are not due within the assessment period will be assumed to be on schedule and full credit will be awarded for work in progress.

Gradient:

- Outstanding: 90% - 100%
- Excellent: 80% - 89%
- Good: 70% - 79%

Performance Measures:

2.2.b **Corrective Action Plan Completion (Self-Assessment)**

Percent of on-schedule corrective action plans resulting from internal Laboratory self-assessment findings/issues.

(Weight = 10%)

Assumptions:

A corrective action plan will be considered completed at the time that the action is documented.

Appropriate credit in the annual Operations Office Safeguards and Security Survey will be given in the topical area ratings for self-assessment issues that are being appropriately handled in a timely manner with a documented corrective action plan.

When a corrective action plan is dependent upon an action, (other than a validation), that must be completed by an outside agency that the laboratory has no direct control over the subject corrective action will not be tabulated as a part of the overall percentage.

If a corrective action plan has multiple milestones and the final milestone is scheduled for completion on a date beyond the assessment period, credit for the corrective action plan being on schedule will be awarded if the last milestone that is scheduled for completion during this assessment period has been completed on schedule.

Findings that have corrective action plans with milestones that are not due within the assessment period will be assumed to be on schedule and full credit will be awarded for work in progress.

Gradients:

- Outstanding: 90% - 100%
- Excellent: 80% - 89%
- Good: 70% - 79%

Section B - Performance Objectives

Part III - Administration

III - 1 Financial Management

Performance Objective #1 - Customer Focus and Satisfaction

Financial Management's practices are customer oriented.
(Weight = 20%)

Criteria:

1.1 **Methods to Evaluate Customer Expectations**
Maintain systematic methods/programs to collect information and determine internal and external customer needs and levels of satisfaction.
(Weight = 10%)

Performance Measures:

1.1.a **Effectiveness of Methods**
Degree to which effective and systematic methods to collect, document, and use customer feedback information are defined and deployed.
(Weight = 10%)

Assumptions:
Identify internal and external customer groups. Describe what and how information is collected, frequency and methods of collection, and how the finance and budget organizations evaluate and improve their processes for determining customer satisfaction, requirements, expectations, and preferences in support of missions.

Gradient:
A Good rating is achieved by developing and implementing the capability for systematically obtaining customer feedback.

Factors that will be considered for a higher rating include how well:

- coverage of customer groups is identified
- the methods used are effective customer communication tools
- customer learning strategies have continuity and are consistently deployed
- customer feedback is used to improve products/services provided to customers

Criteria:	Performance Measures:
1.2 **Customer Satisfaction** Improved levels of customer satisfaction. **(Weight = 10%)**	1.2.a **Customer Satisfaction Results** Improved levels of customer satisfaction over time. **(Weight = 10%)**

Assumptions:
Describe current levels and trends in key measures and/or indicators of customer satisfaction and dissatisfaction.

Gradient:
A Good rating is achieved by demonstrating that Finance and Budget customers are generally satisfied with the products and services provided.

Factors that will be considered for a higher rating include:

- demonstrated improved or sustained high levels customer satisfaction
- customer satisfaction is maintained across most customer groups
- no general dissatisfaction exists with primary products/services provided

Performance Objective #2 - Operational Effectiveness

Achieve cost effective and efficient financial management operations by applying available resources to continuous improvement efforts.
(Weight = 40%)

Criteria:	Performance Measures:
2.1 **Leadership in Improving Financial Management Efficiency and Effectiveness** Consistent with DOE requirements and plans, take proactive leadership role to improve the financial management effectiveness and efficiency of the budget and financial processes and the financial reporting systems. **(Weight = 17%)**	2.1.a **Quality Performance in Reporting Processes** Budgets and financial reports and information, analyses, estimates, and proposals submitted will be evaluated for minimal time/form/content deficiencies and incorporate budget validation and other systematic customer feedback. **(Weight = 5%)**

Assumptions:
The annual budget process and DOE routine periodic reports will be measured for timeliness and quality by measuring on-time performance. A narrative will describe the continuous process/product improvements, internal process used to validate the estimates including a discussion of the balances between programmatic and distributed budget requirements, and the proactive activities related to this Performance Measure.

Gradient:
A Good rating is achieved by meeting customer due dates and by demonstrating tangible incremental improvements in these processes and/or in the products developed.

Factors that will be considered for a higher rating include:

- reductions in cycle time and/or cost, automation improvements and initiatives
- proactive activities such as training and development of Financial Management's staff and internal customers, and coordination with other divisions/organizations to address financial concerns
- customer feedback and other relevant information
- early submission of accurate and complete reports such as MARS/FIS, budgets, and DIMS prior to DOE's due dates.

Assumptions:
The measurement of special ad hoc DOE requests regarding budgets, financial information, analyses, estimates, and proposals submitted will include only formal written requests with deadlines of 8 or more working hours. Narrative will include customer satisfaction information from 1.1.

Gradient:
A Good rating is achieved with 90% of on-time performance with acceptable quality as determined from customer feedback.

Factors that will be considered for a higher rating include:
- on-time performance greater than 90%
- good customer feedback
- process improvements, cost, and cycle time reductions
- handling a higher volume or more complex requests

Criteria:

Performance Measures:

2.1.b **Leadership in Systems Improvements**
Degree to which proactive leadership supports DOE and Laboratory initiatives for continued contractor financial systems improvements.
(Weight = 12%)

Assumptions:
Narrative will describe the Laboratory's progress in support of this criterion, using existing tools and the Financial Management Systems (FMS) plan.

Gradient:
Factors that will be considered for Good rating include:

- timeliness of the FMS plan
- efforts are directed at initiatives with the most value added
- involvement in DOE's initiatives
- progress towards short-term initiatives

Factors considered for a higher rating include:

- progress towards long-term initiatives
- proactiveness in seeking opportunities for supporting DOE initiatives

- improved capacities, capabilities, and/or cost efficiencies for other financial processes not addressed in measure 2.2
- positive customer feedback

Criteria:	**Performance Measures:**
2.2 **Transaction Processing Improvements** Reduce cycle times and/or costs while improving quality and accuracy for the processes identified. **(Weight = 13%)**	2.2.a **Demonstration of Improvement** Evaluation of improvement trends for processes selected for improvement towards best practices as compared with benchmarking information. Showcase areas of excellence. **(Weight = 13%)**

Assumptions:
The Laboratory's finance and budget organizations will conduct benchmarking studies for financial processes identified in the study methodology every two years. The Laboratory will analyze the benchmarking results and select processes to be measured and improved prior to the next benchmarking study. The Laboratory will present its study findings and areas selected for improvement to its DOE customer for concurrence. Additional improvement processes may be selected in conjunction with the DOE. The Laboratory will also use the benchmarking information to select and demonstrate areas of excellence to feature in its self- assessment. The selected processes will be measured and featured in the annual self-assessments during the two years between benchmarking studies. Where necessary and appropriate, benchmarking measures will be augmented with qualitative information and other performance indicators for the selected processes.

Gradient:
A Good rating is achieved by demonstrating that selected process improvements are progressing in accordance with the Laboratory's plan.

Factors that will be considered for a higher rating include:

- process improvements resulting in performance above the benchmarking median
- processes performed close to the benchmarking study's first quartile level
- high levels of product/service quality are maintained
- effective linkage to Objective 1.0
- percent of processes maintained above the benchmarking median
- featured areas of excellence reflect outstanding performance

Criteria:	Performance Measures:
2.3 **Work Force Management** Develop a highly skilled, motivated, empowered Financial Management work force. **(Weight = 10%)**	2.3.a **Effective Work Force Management** Evaluation of processes, systems, and initiatives related to Financial Management work force management. **(Weight = 10%)**

Assumptions:
Narrative to describe the management of processes, systems, and initiatives related to the finance and budget work force.

Gradient:
A Good rating is achieved by establishing a systematic approach to Financial work force management.

Factors that will be considered for a higher rating include:

- span of control ratios
- number and effectiveness of self-directed work teams
- merging of related functions
- training and development activities
- alignment of individual performance objectives/appraisals with Financial Management objectives

Performance Objective #3 - Financial Stewardship and Integrity

Financial Management's practices provide for financial stewardship, including compliance and data integrity.
(Weight = 40%)

Criteria:	Performance Measures:
3.1 **Costs and Commitments are Managed Properly** Ensure that all costs and commitments are within DOE-authorized funding levels and that costs and commitments expected to be in excess of such levels are properly reported and recorded. **(Weight = 10%)**	3.1.a **Costs and Commitments are Controlled to Appropriate Funding Levels** Effectiveness of the Laboratory to control costs to B&R Level 9 and control costs plus commitments within authorized major funding levels (Obligation Control Level). **(Weight = 5%)**

Assumptions:
"Within funding levels" defined as within identified funding in the contract modifications.

"Commitments" are defined as uncosted balances under contracts awarded by the Laboratory that are set aside or encumbered, including purchase orders issued; contracts and subcontracts awarded, including the full liability under lease purchases and capital leases; termination cost for incrementally funded firm fixed price contracts, operating lease agreements, and multi-year service contracts that contain termination clauses; and other agreements for the acquisition of goods and services not yet received and uncosted balances related to other integrated M&O contractor liabilities.

Meeting the objective of this performance measure is applicable only at year end for Construction, Operating, and Capital Equipment funds. Line item capital equipment and construction is applicable monthly. A narrative will be written to describe the Laboratory's performance relative to this measure. The narrative will identify the number of Obligation Control Level (OCL), B&R Level 9, line item capital equipment, and construction funding categories being measured.

Gradient:
A Good rating is achieved by staying within funding levels as defined above.

Factors that will be considered for a higher rating include:

- training and development
- other proactive activities that improve the effectiveness of the Laboratory to manage and control funds
- controlling costs within funding levels identified in the contract modification for each accounting period

Criteria:

Performance Measures:

3.1.b **Control of Funds**
Evaluation of proactive activities designed for control of funds.
(Weight = 5%)

Assumptions:
Narrative describing initiatives.

Gradient:
A Good rating is achieved by implementing an effective process for mitigating administrative control of funds violations.

Factors that will be considered for a higher rating include:

- process improvements
- identify control improvements and enhancements
- awareness training
- timely notification to DOE of significant changes in projected year-end uncosted balances

3.2 **Financial Management Practices**
Ensure that financial management and reporting practices fully disclose the results of operations and contain accurate, useful, timely information for program and fiscal management needs.
(Weight LANL = 10%)

3.2.a **Financial Policies, Practices, Data, and Reports**
Evaluation of the level to which the Laboratory's financial policies, practices, data, and reports conform with applicable DOE requirements.
(Weight LANL = 10%)

Assumptions:
Provide a narrative description of the financial management practices performed to better manage DOE's accounts with primary emphasis on accounts or processes identified by the Laboratory and DOE as high risk.

Gradient:
A Good rating is achieved by demonstrated incremental improvement in financial management practices of the high risk areas to ensure that financial practices, policies, data, and reports are consistent with DOE requirements.

Factors that will be considered for a higher rating include:

- results of financial statement audits
- results of CAS Disclosure Statement reviews/revisions
- significant improvement in the financial practices of high risk accounts or processes
- improvement in the financial practices of other low risk accounts while maintaining good practices for high risk accounts
- proactive interaction with the DOE with respect to financial management matters

Criteria:

Performance Measures:

3.3 **Effective Internal Controls and Compliance**
Provide for effective internal controls and ensure timely and effective resolution of identified weaknesses.
(Weight LANL = 20%)

3.3.a **Internal Controls/Compliance Management**
Degree to which an effective system for identifying, reviewing, and correcting (if identified) financial management internal control/ compliance processes is maintained.
(Weight LANL = 20%)

Assumptions:
Describe and self-assess the effectiveness of the internal controls and financial management techniques employed to minimize and mitigate risks for the major financial management processes identified in conjunction with DOE.

Gradient:
A Good rating is achieved by accurately describing well designed and well deployed systems/processes for managing internal controls and compliance concerns/weaknesses.

Factors that will be considered for a higher rating include:

- a risk prioritization system that demonstrates Laboratory focus on high risk financial management control/compliance areas
- prompt completion of corrective actions
- process improvements
- aggressiveness of corrective action schedules
- effective process for identifying with DOE, annual target areas
- proactive leadership in addressing and correcting internal and external audit findings and concerns related to financial management practices

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Assumptions:
Where appropriate incorporate, in the self assessment, historical trends as the data becomes available.

Laboratory-specific targets identified by end of January of each year contingent on availability of benchmarking results.

Note: Laboratory-wide cost savings initiatives require the highest level of visibility and Laboratory commitment. For this reason, Performance Objectives, Criteria and Measures (POCMs) addressing cost savings are included in the Laboratory Management POCMs instead of here in the Financial Management section.

Section B - Performance Objectives

Part III - Administration

III - 2 Human Resources

Performance Objective #1 Cost Effectiveness

The Laboratory will strive to achieve cost effective HR systems and practices.
(Weight = 32%)

Criteria:	**Performance Measures:**
1.1 **Review and Evaluation of HR Systems and Processes** HR systems are processes reviewed and evaluated in order to optimize the delivery of services with respect to quality and cost. **(Weight = 11%)**	1.1.a **Evaluation of HR Systems and Processes** The Laboratory will critically examine HR systems and processes. **(Weight = 11%)**

*Agreement***:**
LANL/LLNL: The Laboratory will use a variety of techniques that may include internal customer feedback mechanisms, cost benefit analysis, work flow analysis, process mapping, benchmarking, etc., to streamline, reengineer, outsource, or eliminate existing systems and processes or implement new initiatives.

LBNL:
1. The Laboratory will critically examine and document the system for identifying supervisors, managers and confidential employees.
2. The examination will emphasize increasing efficiencies and eliminating redundant work.

Gradients:
LANL:
Good:
Major HR systems or processes (as defined by the Laboratory) are prioritized for review. Project plans are developed for one or two, and action is initiated.

Excellent:
As a result of reengineering, or other actions, improvements are achieved as evidenced by internal customer feedback, improved cycle times, benchmarking earlier outcomes vs. current outcomes, cost benefit analysis, or comparisons with other organizations which have made similar efforts, cost savings, etc.

Outstanding:
As a result of reengineering, or other actions, significant improvements are achieved as evidenced by internal customer feedback; improved cycle times; benchmarking earlier outcomes vs. current outcomes, cost benefit analysis, or comparisons with other organizations which have made similar efforts, cost savings, etc.

LBNL:
Good:
Identification and accurate quarterly reporting of the names of supervisors, managers, and confidential employees to ensure that employees are correctly classified.

Excellent:
No unfair labor practices charges or grievances are received based upon incorrect identification of supervisors, managers, or confidential employees.

Outstanding:
The Laboratory completes the system review identified for FY 98, implements appropriate actions to correct identified deficiencies and begins another high priority HR system review.

LLNL:
Good:
Major HR systems or process (as defined by the Laboratory) are prioritized for review. Project plans are developed for one or two, and action is initiated, and there is measurable progress or actions taken.

Excellent:
As a result of process improvements or other actions, added improvements are achieved over the prior year as evidenced by internal customer feedback, benchmarking earlier outcomes vs. current outcomes, cost benefit analysis, or comparisons with other organizations which have made similar efforts, cost savings, etc.

Outstanding:
In addition, significant improvements are achieved, such as completion ahead of schedule, or conclusion of unusually complex projects, or can serve as a model for other organizations.

Criteria:	**Performance Measures:**
1.2 **Workforce Planning/Staffing** The Laboratory has an effective, integrated workforce planning system **(Weight = 10%)**	1.2a **Workforce Planning** Evaluation of the effectiveness of the Laboratory's workforce planning system. **(LANL Weight = 5%)** **(LBNL Weight = 4%)** **(LLNL Weight = 10%)**

*Agreements***:**
LANL: This measure will consider development and implementation of workforce planning processes and documentation which identify workforce skill requirements and staffing strategies. "Implement effectively..." means the degree to which it contains the following elements:

- Development of a baseline assessment of current workforce composition, jobs and competencies.
- Analysis of future workforce requirements based on strategic plans, program guidance, budgets, and contract reform strategy.
- Determination of future workforce composition, jobs, and competencies.
- Comparison of current workforce composition to future workforce composition to identify shortages and excesses.
- Training and development programs address and minimize the difference between the internal skills that exist and those that are required to satisfy staffing requirements identified in the workforce planning process.

LBNL: HR will initiate a process for partnering with the Directorate and the major programmatic division customers (Computing Sciences, Energy Sciences, General Sciences, Life Sciences) to develop proactive workforce pre-planning consistent with new scientific initiatives.

1. "Process" will be regular meetings, at least quarterly, with the Directorate and key programmatic division customers.
2. HR will produce tailored staffing/recruitment/training plans to address new scientific initiatives.
3. Workforce planning strategies will be aligned with the Laboratory's Institutional Plan and supportive of the principle of the DOE contractor HR Strategic Plan.

Gradients:

LANL

Good:
Development and implementation of workforce planning processes and documentation which satisfy all elements listed.

Excellent:.
Shortfalls are tracked, trended, and benchmarked against like organizations as agreed upon by the Laboratory and the Department of Energy.

Outstanding:
Implementation of strategies to resolve shortfalls and excesses between current and future workforce compositions.

LBNL:

Good:
Quarterly pre-planning meetings are held with the Directorate and the major programmatic division customers (Computing Sciences, Energy Sciences, General Sciences, Life Sciences) to develop proactive workforce pre-planning consistent with new scientific initiatives.

Excellent:.
A plan with milestones and a schedule is developed for conducting a baseline assessment of current workforce composition and demographics.

Outstanding:
A dynamic methodology (i. e., one that is responsive to changing circumstances) is developed to connect current workforce with future needs.

LLNL:

Good:
Workforce reviews are conducted regularly; staffing, recruiting and appropriate training plans are updated to reflect changing needs.

Excellent:.
In addition, assess new hire and hiring manager satisfaction with recruiting and orientation process, and modify process as required.

Outstanding:
In addition, development of tools (such as implementation of skills database where practical, etc.) and capabilities (such as expanded, integrated campus recruitment effort, etc.) for ongoing improvement. Recruiting efforts are analyzed for cost and effectiveness, and changes made to provide continuous improvement and increased cost effectiveness.

Criteria:		**Performance Measures:**
	1.2b	**Staffing/Recruiting/Supplemental Workforce (LANL/LBNL only)** Evaluation of the effectiveness of the Laboratory's system, policies, and procedures for the appropriate, cost effective management of recruiting programs, hiring processes, and supplemental labor workforce. **(LANL Weight = 5%) (LBNL Weight = 6%)**

Agreements:
LANL: Analyses and evaluations will be conducted to determine the effectiveness of the mechanisms utilized to implement workforce planning results. The following areas will be addressed:

- Acquisition and management of supplemental workforce are cost effective and address workforce planning requirements.
- Cost effective recruiting programs yield highly diverse and qualified pools of applicants.
- Rate of job offers accepted to job offers made helps to determine that employment with the Laboratory is desirable.
- Total cycle time averages from date of job requisition to date of offer letter help to determine whether the employment process is effective.

By October 1, 1997, the Laboratory and DOE/AL will develop and document written criteria and guidelines to be utilized for Laboratory's self-assessment in the areas of recruiting, hiring and supplemental labor.

LBNL:
• Recruiting programs
1) The Laboratory's recruiting program will be analyzed to determine the most cost effective recruiting strategies.
2) "Recruitment strategies" will include newspaper ads, journal ads, trade shows, search firms, Web technology.
3) Because FY 98 is the first year of this PM, sufficient data for meaningful analysis may not be
reasonably collected within the assessment period.
• Supplemental labor
1) The results of the critical review will form the basis for tracking and trending the use of supplemental labor.
• Hiring Processes
The Laboratory will not evaluate hiring processes under this Performance Measure.

Gradients:
LANL:
Good:
Current Laboratory recruiting/staffing strategies and processes are documented and systems are developed to capture job offer/rejection and job requisition processing information.

Excellent:
Laboratory recruiting/staffing strategies and processes are benchmarked against like organizations as agreed upon by the Laboratory and the DOE.

Outstanding:
Areas for improvement are addressed and demonstrated improvements are indicated by virtue of better cost effectiveness and improved staffing results.

LBNL:

- **Recruiting:**

Good:
Baseline data collected for future comparison and planning.

Excellent:
Analysis of baseline data and development of a plan to increase the effectiveness of various recruitment strategies.

Outstanding:
Areas for improvement are addressed and demonstrated improvements are indicated by virtue
of cost per hire, and evidence of qualified and diverse applicant pools.

- **Supplemental Labor:**

Good:
Completion of a critical review of the process for identifying and reporting on supplemental labor

Excellent:
Policy on appropriate use of supplemental labor is developed

Outstanding:
Evidence of forecasting the use of supplemental labor including cost projections and evaluation
for cost effectiveness.

Criteria:

1.3 **Compensation**
Compensation is administered in a cost competitive manner which takes into account external and/or internal equity.
(Weight = 11%)

Performance Measures:

1.3.a **LANL: Salary Increase Fund (SIF)**
Evaluation of the comprehensiveness and timeliness of Salary Increase Fund (SIF) proposal.
(Weight = 7%)

LBNL: Baselining
Baseline evaluation of the Laboratory's research and support FTE costs.
(Weight = 6%)

LLNL: Currency of Job Classification
Cumulative % of classifications reviewed, updated and evaluated in accordance with the Laboratory's current system. Baseline is to have every classification reviewed at least once every 5 years.
(Weight = 6%)

Agreements:
LANL: An underlying principle of this measure is that the compensation program is market driven and rewards performance and productivity.

LBNL:
1. "Research FTE" are defined as professional staff who are programmatically funded.
2. "Support FTE" are defined as technical and administrative staff who are funded from either overhead or programmatic funds.
3. "Like R&D facilities" will be defined as multi-disciplinary research organizations with representation from both the public and private sectors as mutually agreed between DOE and the Laboratory.
4. "Career" (i.e. benefit accruing) vs. supplemental labor will be reported in separate graphs

LLNL:
Report annually on cumulative % of classifications reviewed (including results/actions) with the goal of 100% by the end of a 5-year period.
1. In assessing the value of job classifications, both internal alignment and external market forces must be considered.
2. Classifications for which changes are required will be counted under the cumulative % in the year in which the changes have been completed.

Gradients:
LANL:
Good:
SIF addresses all of the elements specified in the Appendix A and meets the agreed upon time requirements.

Excellent:
SIF incorporates agreements reached for improvements from the previous cycle's SIF, and identifies early efforts at resolution of any special problem areas.
Outstanding:
SIF thoroughly addresses all of the elements specified in Appendix A and includes other relevant issues not previously specified, meets or exceeds in the agreed upon time requirements, and the SIF proposal can serve as a model for other organizations.

LBNL:
Good:
100% of research and support FTE costs baselined.

Excellent:
Results of baseline evaluation analyzed and presented to Laboratory Management.

Outstanding:
Demonstrated implementation of appropriate recommendations to provide data that will enable management to make informed decisions regarding FTE costs.

LLNL:
Good:
95% in 5 years, plus a quality review process/system institutionalized as a part of normal processes.

Excellent:
100% in 5 years, plus a quality review process/system institutionalized as a part of normal processes.

Outstanding:
In addition, there are current classification description matrices which are made available to supervisors/managers, and the Laboratory develops training for supervisors/managers on effective usage of classification process and tools.

Performance Measures:

1.3.b **Effectiveness of Implementation of Market-Based Pay Policy**
LANL/LLNL: % of weighted classification average salaries fall within ± 5% of target agreement.
(LANL Weight = 4%)
(LLNL Weight = 5%)

LBNL: Benchmarking- Benchmark evaluation of the Laboratory's research and support FTE costs in like R&D facilities
(Weight = 5%)

Agreement:
LANL: This measure may be limited to those classifications with 10 or more incumbents and to those classifications that are benchmarked. For purposes of the measure, "classifications" shall be limited to those in LANL's Structured Series, i. e., Administrative exempt and non-exempt and Technicians. LANL will compute the percentage of employees whose jobs are matched to survey jobs and whose salaries are within ±5% of market rates. Comparisons will be made when survey results become available. LANL will submit data to this measure in the third quarter. Regarding the Good: gradient listed below, LANL may meet expectations with less than 50% if LANL obtains DOE concurrence in the documented analysis of the situation and any planned corrective action.

LBNL:
1. "Research FTE" are defined as professional staff who are programmatically funded.
2. "Support FTE" are defined as technical and administrative staff who are funded from either overhead or programmatic funds.
3. "Like R&D facilities" will be defined as multi-disciplinary research organizations with representation from both the public and private sectors as mutually agreed between DOE and the Laboratory.

4. "Career" (i.e. benefit accruing) vs. supplemental labor will be reported in separate graphs.

LLNL: This measure may be limited to those classifications with 10 or more incumbents and, to those classifications within the classification series that are benchmarked. Classification series average salary will then be compared to the target and designated "yes" if the classification series average falls within ±5% of the target and "no" if they do not. The populations of classifications series designated "yes" will then be added and the sum divided by the total population in the covered classifications series. Targets for the fiscal year shall be established by LLNL prior to the implementation of the salary review for that fiscal year.

LLNL will track and share data at the benchmark level (i.e., 105.1s, 105.2s, 105.3s, etc.) but will be graded at the classification series level (i. e., 100s, 200s, 300s, etc.). For positions included in the competency-based performance management pilot ("role/stage assignment(s)" are substituted for "classification(s)") the numbers for the approximate 1,300 employees in the pilot will be deleted for all calculations within the classification series whenever appropriate.

Gradients:
LANL/LLNL:
Good:
50% or greater but less than 70%

Excellent:
70% or greater but less than 85%

Outstanding:

85% or greater

LBNL:

Good:
A comprehensive plan, milestones and schedule in place which includes identification of comparators and job titles included in the research and support categories.

Excellent:
Quarterly status reports reflect progress towards milestones.

Outstanding:
Plan is completed and results are analyzed and presented to Laboratory Management.

Performance Objective #2 Work Force Excellence

The Laboratory will develop and motivate its work force to excel in meeting programmatic needs of the Laboratory and its customers.
(Weight = 16%)

Criteria: **Performance Measures:**

2.1 **Performance Management**
Effective employee performance management.
(LANL/LBNL Weight = 8%)
(LLNL Weight = 10%)

2.1.a **Currency of Performance Appraisals**
Evaluation of the system that ensures that each employee is appraised on an annual basis, against pre-established, job-related performance criteria is in place
(LANL Weight = 2%)
(LBNL Weight = 8%)
(LLNL Weight = 5%)

Agreements:
LANL: Baseline of completed appraisals is 95%. Report latest viable data. Percent completed is determined by dividing the number of completed performance appraisals by the eligible population. A 10% random sample of the completed Performance Appraisals will be drawn annually and reviewed by a team of qualified personnel to determine if the Performance Appraisals contain all the elements and meet the standards set forth in laboratory guidelines. A performance appraisal will not be counted as completed unless it has the elements set forth in the laboratory guidelines. September data will be used for FY 98. Documented evidence of a feedback mechanism to management on the results of the qualitative review is required. The lowest percentage achieved between the quantitative and qualitative scores will determine the awarded gradient.

For the purposes of this measure, the Laboratory will report senior manager performance appraisals in the subsequent fiscal year data.

The Laboratory will select the 10% random sample from the Performance Appraisals submitted under the new Performance Management System.

LBNL:
1. The review will consider the following factors:
- Position description is in place and is appropriate to the job classification.
- If an Individual Development Plan is required, it is in place.
- The rating is consistent with the narrative.
- The appraisal has been completed consistent with institutional guidelines.

2. A 5% random sample will be used which includes proportionate representation from S&E, Admin./Clerical, and Technical job classifications.

LLNL: Report latest viable data. Evaluation will be of the percentage completed and quality of annual performance appraisals for employees against pre-established, job-related performance criteria. Percent completed determined by dividing the number of completed performance appraisals by the eligible population. A performance appraisal will not be counted as completed unless it has the elements set forth in the laboratory guidelines. September (or the latest available) data will be used for FY98.

Gradients:
LANL:
Good:
95% on Performance Appraisal completion's and 75% or greater but less than 80% of the 10% random sample contain all the elements and meet the standards set forth in Laboratory guidance.

Excellent:.
96% on Performance Appraisal completion's and 80% or greater but less than 85% of the 10% random sample contain all the elements and meet the standards set forth in Laboratory guidance.

Outstanding:

97% on Performance Appraisal completion's and 85% or greater of the 10% sample contain all the elements and meet the standards set forth in Laboratory guidance.

LBNL:
Good:
A 5% random sample is completed per the Agreements noted. Feedback is provided to line management and training or other remediation is provided as appropriate.

Excellent:
Analysis for trends which may reflect problems, e.g., poor business practice, liability exposure, cost inefficiencies, and implementation of training or remediation as appropriate based on the results of the analysis.

Outstanding:
Actions to address trend or assessments that the appraisal system is being implemented consistently in all organizations.

LLNL:
Good:
95% on Performance Appraisal completion's and 75% or greater but less than 80% of the 2% random sample contain all the elements and meet the standards set forth in Laboratory guidance.

Excellent:
96% on Performance Appraisal completion's and 80% or greater but less than 85% of the 2% random sample contain all the elements and meet the standards set forth in Laboratory guidance.

Outstanding:
97% on Performance Appraisal completion's and 85% or greater of the 2% random sample contain all the elements and meet the standards set forth in Laboratory guidance.

Performance Measures:

2.1.b **Individual Development Plan (LANL/LLNL only)**
% of employees with a current development plan that meets qualitative standards.
(LANL Weight = 2%)
(LLNL Weight = 5%)

Agreements:
LANL: Baseline for the number of employees with a current development plan is 75%. A 10% random sample of the completed development plans will be drawn annually and reviewed by a team of qualified personnel to determine if the development plans contain the elements and meet the standards set forth in Laboratory guidelines. Documented evidence of a feedback mechanism to management on the results of the qualitative review is required. The lowest percentage achieved between the quantitative and qualitative scores will determine the awarded gradient.

LLNL: A 2% random sample of the covered population will be drawn to review development plans for acceptability. An IDP will not be counted as current unless it has the elements set forth in laboratory guidelines. In cases where the employee does not want an IDP and signs this statement, it will be counted as current for purposes of this PM. 600, 700, 800 and 900 series employees are not included in the random sample drawn for review.

Gradients:
LANL:
Good:
75% or greater but less than 80% on development plan completion's and 75% or greater but less than 80% of the 10% random sample contain all the elements and meet the standards set forth in Laboratory guidance.

Excellent:.
80% or greater but less than 85% on development plan completion's and 80% or greater but less than 85% of the 10% random sample contain all the elements and meet the standards set forth in Laboratory guidance, or, 85% or greater on development plan completion's and 75% or greater but less than 80% of the 10% sample contain all the elements and meet the standards set forth in Laboratory guidance.

Outstanding:
85% or greater on development plan completion's and 85% or greater of the 10% sample contain all the elements and meet the standards set forth in Laboratory guidance.

LLNL:
Good:
75% or greater but less than 80% and guidelines issued.

Excellent:
80% or greater but less than 85%, guidelines issued, sample formats posted to internal HR website, feedback given to Directorates as needed, and refresher training made available.

Outstanding:
In addition to above, 85% or greater completion rate is achieved.

Performance Measures:

2.1.c **Employee Development (LANL only)**
Evaluation of the employee development program's ability to meet the Laboratory's workforce planning and mission needs
(Weight = 4%)

Agreements:
It is understood that employees are primarily responsible for identifying and addressing their career and development needs consistent with the Laboratory's mission needs.

Gradients:
Good:
Guidance is issued describing employee responsibilities for career and employee development consistent with the Laboratory's workforce planning and mission needs.

Excellent:.
Analysis is conducted to determine the extent of the differences between the individual development plan requirements and the Laboratory workforce planning and mission needs.

Outstanding:
As a result of analysis, formal action plans are developed and implemented to improve Laboratory workforce planning.

	Criteria:	**Performance Measures:**
2.2	**Effectiveness of Employee/ Labor Relations** Effectiveness of employee/labor relations programs. **(LANL/LBNL Weight = 8%)** **(LLNL Weight = 6%)**	2.2.a Measure the effectiveness of complaint resolution. **(LANL Weight = 8%)** **(LBNL Weight = 8%)** **(LLNL Weight = 6%)**

Agreements:
LANL: Where known, multiple internal filings on the same issue by the same individual may be counted as 1. Actions filed by applicants and retirees will not count against this performance measure.

Internal organizations that will provide data for this measure will include Employee Relations, the Internal Evaluation Office, the Ombuds Office, and Legal Counsel. Types of cases will include, but not be limited to employee discipline, EEO, IEO, administrative reviews, grievances. Data will only be reported in a manner which will assure anonymity.

LBNL: The Laboratory will trend formal complaints from employees by type of complaint, division/department, job class, type of appointment (also by bargaining unit for represented employees) in order to identify problem areas in need of corrective action.

1. Trend data will be collected and reported quarterly.
2. "Formal complaints" will include administrative reviews, grievances, mediation, litigation and external agency charges. In addition, for labor relations trending, "formal complaints" will also include unfair labor practice charges.
3. It is acknowledged that formal complaints may result from multiple causes.
4. Because FY '98 is the first year of this PM, sufficient data for meaningful trending may not be reasonably collected within the assessment period.

LLNL: The Laboratory will trend Ratio of External to Internal Complaints, and Ratio of Formal to Informal Complaints, plus provide a narrative broadly describing processes and efforts to mitigate and minimize issues, as it did for FY96 PMs. External complaints are agency filings

and lawsuits. Multiple filings on the same issue by the same individual will count as 1; actions filed by applicants and retirees will not count against this performance measure.

The narrative summary will discuss management initiated actions that may have impacted the results of this measure.

Gradients:

LANL:

Good:
Conduct analysis of cases by (1) where they were originally filed, (2) the type of case, (3) the issue involved, (4) the outcomes, (5) cycle times for processing, and, (6) approximate cost involved in processing and resolution.

Excellent:.
Process results are benchmarked against other like organizations as agreed to by the Laboratory and the DOE.

Outstanding:
As a result of analysis and benchmarking, formal management action plans are developed and implemented to improve employee relations.

LBNL:

Good:
Trending is conducted per the Agreements

Excellent:
Data are analyzed and provisions made for corrective action

Outstanding:
Evidence of reduced number of formal complaints in problem areas identified

LLNL:

Good:
A system is in place to respond to both formal and informal complaints, trend data is presented and a narrative summary provided of management actions impacting the data.

Excellent:
In addition, a trend analysis is done to determine the nature of issues being raised, and a report of institution-wide trend data is provided to Laboratory management.

Outstanding:
In addition, management actions are taken to address institution-wide issues raised through the on-going awareness and knowledge of trends. New issues raised by the end of the assessment year trend analysis will be addressed though management action the following year.

Performance Objective #3 Equal Opportunity

Strengthen the commitment to and accountability for equal opportunity, affirmative action and work force diversity.
(Weight = 24%)

Criteria:	**Performance Measures:**
3.1 **Employment of Women and Minorities** Promote work force diversity and improve the representation of minorities and women in the work force through the development and implementation of strategies and other affirmative action "good faith efforts." **(Weight = 24%)**	3.1a **Employment of Minorities** An assessment of planning and implementation of good faith efforts designed to improve recruitment, selection and retention of minorities in high priority underutilized job groups. **(Weight = 12%)**

Agreement:

1. High priority underutilized groups will be selected at the beginning of the assessment period as defined by each Laboratory. For LANL, this is October 1; for LBNL, this is October 1; and for LLNL, this is January 1. The following factors may be utilized for the designation of high priority areas: underutilization levels, availability levels, placement opportunities and typical size and diversity of applicant pools.

2. The Laboratory will provide a results oriented plan with a purpose of improving organizational performance in the recruitment, selection, and retention of minorities in the selected high priority areas. The plan will display the specific actions which will be targeted for achievement during the fiscal/calendar year and assigned responsibility for those actions. The plan shall incorporate, at a minimum, good faith efforts designed to enhance the following:

    - coupling of outreach and recruitment efforts in high priority job groups
    - systematic effort to measure and report outcomes and impact of the outreach and recruitment process
    - diversity and viability of candidate pools
    - efforts to educate and sensitize the work force to diversity awareness
    - integration of diversity issues in Laboratory operations and the daily fabric of Laboratory life
    - active top management support of diversity considerations, including affirmative action and educational outreach efforts
    - representation of minorities as defined in the Laboratory's Affirmative Action Program

3. LBNL will observe the dates, deliverables and modified gradient language specified in the Memorandum of Agreement signed by LBNL, DOE and, UCLAO 10/17/97.

Gradients:
Good:
Plan Development and Execution

1. Plan Development -- The Laboratory developed a results-oriented plan which clearly communicates the Laboratory's commitment and investment in carrying out its good faith efforts to develop strategies and actions to improve employment and retention of minorities in high priority underutilized job groups. The plan must incorporate, at a minimum, good faith efforts as outlined above.

2. Plan Execution -- Specific actions identified in plan were carried out substantially in the manner and time-frames identified in the plan.

The Laboratory will summarize how the plan was executed relative to the specific actions taken to improve the recruitment, selection and retention of minorities. The summary should include a narrative describing the efforts taken, and any significant outcome or events resulting from the process. The summary should also include statistical analyses assessing the representation of minorities in candidate pools, interviews, placements, and attrition in the specified job groups.

Excellent:
In the aggregate, high priority underutilized job groups show improvement toward full utilization. Job groups not designated as high priority also show improvement or remain at the same level of utilization.

Outstanding:
In addition to the criteria for Excellent:, improvement toward full utilization is achieved for each designated high priority group or full utilization is achieved in any of the high priority job groups

Performance Measures:

3.1b **Employment of Women**
An assessment of planning and implementation of good faith efforts designed to improve recruitment, selection and retention of women in high priority underutilized job groups.
(Weight = 12%)

Agreement:

1. High priority underutilized groups will be selected at the beginning of the assessment period. . For LANL, this is October 1; for LBNL, this is October 1; and for LLNL, this is January 1. The following factors may be utilized for the designation of high priority areas: underutilization levels, availability levels, placement opportunities and typical size and diversity of applicant pools.

2. The Laboratory will provide a results oriented plan with a purpose of improving organizational performance in the recruitment, selection, and retention of women in the selected high priority areas.

The plan will display the specific actions which will be targeted for achievement during the fiscal/calendar year and assigned responsibility for those actions. The plan shall incorporate, at a minimum, good faith efforts designed to enhance the following:

- coupling of outreach and recruitment efforts in high priority job groups
- systematic effort to measure and report outcomes and impact of the outreach and recruitment process
- diversity and viability of candidate pools
- efforts to educate and sensitize the work force to diversity awareness
- integration of diversity issues in Laboratory operations and the daily fabric of Laboratory life
- active top management support of diversity considerations, including affirmative action and educational outreach efforts
- representation of women as defined in the Laboratory's Affirmative Action Program

3. LBNL will observe the dates, deliverables and modified gradient language specified in the Memorandum of Agreement signed by LBNL, DOE, and UCLAO 10/17/97.

Gradients:
Good:
Plan Development and Execution

1. Plan Development -- The Laboratory developed a results-oriented plan which clearly communicates the Laboratory's commitment and investment in carrying out its good faith efforts to develop strategies and actions to improve employment and retention of women in high priority underutilized job groups. The plan must incorporate, at a minimum, good faith efforts as outlined above.

2. Plan Execution -- Specific actions identified in plan were carried out substantially in the manner and time-frames identified in the plan.

The Laboratory will summarize how the plan was executed relative to the specific actions taken to improve the recruitment, selection and retention of women. The summary should include a narrative describing the efforts taken, and any significant outcome or events resulting from the process. The summary should also include statistical analyses assessing the representation of women in candidate pools, interviews, placements, and attrition in the specified job groups.

Excellent:
In the aggregate, high priority underutilized job groups show improvement toward full utilization. Job groups not designated as high priority also show improvement or remain at the same level of utilization.

Outstanding:
In addition to the criteria for Excellent:, improvement toward full utilization is achieved for each designated high priority group or full utilization is achieved in any of the high priority job groups

Performance Objective #4 Customer Needs

Human Resources has a system for identifying and evaluating customer needs and for building and maintaining positive customer relationships.
(Weight = 14%)

Criteria:

4.1 **Customer Needs Analysis**
Requirements, expectations and preferences of internal and external customers are collected and addressed. Strategies to evaluate and anticipate needs are in place.
(Weight = 14 %)

Performance Measures:

4.1.a **Customer Needs Input**
Evaluation of the implementation and utilization of internal and external customer input mechanisms.
(Weight = 14%)

Agreement:
LANL/LBNL: Mechanisms will be used to gather customer input regarding HR practices. Practices could be policies, services, programs, systems, processes and procedures. These mechanisms are varied and could include customer surveys, focus groups, customer feedback forms, etc. Measurement will include the extent of utilization of customer input in improving HR practices and will include closing the loop with the customers. Measurement deliverable will be a narrative description of how the laboratory addresses the performance criterion and objective.

LLNL: Evaluate the use of customer input mechanisms to meet customer needs.

Gradients:
Good:
Internal and external customer input mechanisms exist and are utilized to evaluate and improve human resources practices. Input and any changes to practices, whether resulting from feedback or not, are communicated to the customers, as appropriate.

Excellent:
Internal and external customer requirements, expectations and preferences are collected and utilized in a methodical manner to evaluate and improve human resources practices. Methodical manner means the information sought from customer feedback mechanisms and the frequency of collection are clearly defined. New or changes to existing practices are clearly linked to feedback results as well as the laboratory's strategic direction and communicated to the customers, as appropriate.

Outstanding:
In addition to the items identified under Excellent:, other data such as industry standards, utilization of services and operational effectiveness indicators are collected and taken into consideration. Furthermore, Human Resources evaluates and improves its processes for determining customer requirements, expectations and preferences.

Performance Objective #5 HR Leadership in Deploying Mission/Business Strategy

The Laboratory aligns its HR plan with the Laboratory strategic or institutional plan and supports the principle of the DOE contractor HR strategic plan.
(Weight = 14%)

Criteria:	**Performance Measures:**
5.1 **Alignment of HR Programs** HR programs and policies such as in recruitment and staffing, compensation and benefits, labor and employee relations, diversity and training are aligned with Laboratory business strategies. **(Weight = 14%)**	5.1.a **Deployment of Strategy** Evaluation of the HR planning process that addresses alignment of HR programs and practices with business plans as well as the well being of the entire work force. Measurement will also include the strategy to communicate with employees, supervisors and managers regarding HR programs and practices. **(Weight = 14%)**

Agreement:
Measurement Deliverable: Narrative description of the above.

LLNL: The evaluation will include items such as those noted in the PM 5.1.a, above, plus any others relevant to this POCM.

Gradients:
Good:
Documented plan to align HR programs and practices with the Laboratory business plans or strategy. Documented communication strategy.

Excellent:
Evidence of implementation of documented HR plan.

Outstanding:
Evidence of implementation of the HR documented plan and communication strategy that addresses key aspects of the HR planning elements. For LANL those elements are contained in the Baldrige criteria. In addition, the work force planning process addresses the alignment of the work force with business needs such as core mission requirements, cost cutting or budget requirements and streamlining efficiency initiatives, while balancing such requirements with the needs of employees. The organization demonstrates a balance between work force and organizational needs by effectively implementing strategies for targeted recruitment, skill mix requirements, internal placements, appropriate retraining programs, outplacement activities, etc.

Section B - Performance Objectives

Part III - Administration

III - 3 Information Management

Performance Objective #1 Information Management Program

The Laboratory manages information as a corporate resource to improve the quality of its products, to add value to scientific programs and customer services, and as a tool to improve its work processes
(Weight = 100%)

Criteria:

1.1 **Strategic and Tactical Planning**
Information Management practices will be guided by programmatically coordinated strategic and tactical planning.
(Weight = 20%)

Performance Measures:

1.1.a **Planning Initiatives**
Evaluation of evidence that IM planning supports the Laboratory's mission.
(Weight = 20%)

Assumptions:
Measurement deliverable – IM plans or narrative descriptions of IM initiatives that support the mission and plans of the Laboratory. IM planning supports both programmatic and operational/administrative needs. Reference may be made to accessible work products or other existing Laboratory documentation.

Gradient:
Good:
Planning, evidenced by documentation, that effectively supports the Laboratory's missions and customer requirements. Planning documents demonstrate the effectiveness of the planning approach of (1) aligning with the Laboratory's missions (2) determination of customer requirements and expectations (3) integration of the various components of information resources.

Excellent and Outstanding factors to be considered:
Existence of one or more of the following:

- substantial progress against milestones under challenging conditions.
- external recognition of excellence in IM planning.
- implementation of tools to facilitate IM planning.
- demonstrated support of the Laboratory's mission through IM planning that exceeds the Laboratory's targets, goals or objectives.

Criteria:	Performance Measures:
1.2 **Self Assessment Program** Maintain a self assessment program that evaluates the effectiveness of management and operational practices. **(Weight = 25%)**	1.2.a **Self Assessment Program** Evaluation that self assessments are taking place and that corrective actions, where necessary, are accomplished in a timely and effective manner. **(Weight = 25%)**

Assumptions:
Measurement deliverable – self-assessment of the Information Management functions accompanied by appropriate supporting material. The narrative description may be accomplished through reference to accessible work products or other existing Laboratory documentation. The Laboratory and its DOE Operations Office will agree to develop and document in writing guidelines for self assessment criteria to be used. These written guidelines for the SA criteria to be used to assess the performance of the DOE/Laboratory agreed-to IM focus areas will be completed by October 1, 1997 and will be shared with all members of the IM team. IM focus area results must be incorporated in the Laboratory's Self-Assessment Report**.**

Gradient:
Good:
The self assessment addresses all agreed-upon criteria. The self assessment is based upon objective supporting material where appropriate. Deficiencies noted in previous assessments have been corrected or have corrective action plans under development or in place. Results of self assessments demonstrate that compliance issues are being effectively and efficiently addressed

Excellent and Outstanding factors to be considered:

- System for rescheduling missed milestones established.
- System for timely communication of changes to appropriate management implemented.
- Cost effective and/or innovative approaches to achieving the objectives of the self assessment program.
- Results of self assessments demonstrate that compliance issues were addressed in advance of target dates and goals were exceeded, or are addressed with results that demonstrate significant cost-savings and efficiencies attributable to Information Management innovation.

Criteria:	Performance Measures:
1.3 **Information Management Program Results** The information management program provides cost-effective quality products and services that meet customer requirements. **(Weight = 55%)**	1.3a **Level of Customer Satisfaction** Evaluation of annual reviews of customer satisfaction which compare results with previous reviews, trend customer satisfaction, and implement activities toward improvement. **(Weight = 25%)**

Assumptions:
Measurement deliverable - results of the customer satisfaction reviews.

Gradient:

Good:
A demonstrated approach in response to the measurement of customer satisfaction levels. The approach will include the rationale for process by which customer input is acquired. Evidence of customer involvement in development of information management plans, including conceptual, deployment, maintenance, and transition. Clear evidence of meeting commitments to customers requirements.

Excellent and Outstanding:
Factors to be considered:
- Cost effective and/or innovative approaches to measuring customer satisfaction.
- Aggressive responses to information derived in determining customer satisfaction levels.
- Customer involvement in all stages of information management activities, including conceptual, deployment, maintenance, and transition.
- Evidence of improvement in customer satisfaction levels relative to product and service innovation.
- Evidence of significant improvements in systems and process and demonstrated results attributable to timely analysis of customer requirements, or evidence of multiple cycles of improvements with significant results.

Criteria:

Performance Measures:

1.3b **Operational Effectiveness**
Evaluation of measurable improvements and cost-effective operations.
(Weight = 30%)

Assumptions:
Measurement deliverable - narrative description of the information management program's accomplishments which have resulted in measurable improvements in the provision of cost-effective, quality products. The narrative description may be accomplished through reference to accessible work products or other existing Laboratory documentation.

Gradient:
Good:
Examples that demonstrate cost-effective, quality IM services and products. A system for measuring performance. Establishment of cost-efficiencies and cost-savings goals.

Excellent and Outstanding factors to be considered:
- Results from cost effective and/or innovative approaches to improving information management.
- Successful implementation of new technologies in support of programmatic requirements.
- Evidence of successful results from prioritization efforts.
- Demonstrated application of best business practices.
- Benchmarking initiatives indicate best-in-class performance.
- Peer review findings recognize operational effectiveness.
- Demonstrated results which clearly indicate that cost-efficiencies and cost-savings goals were exceeded; demonstrated significant improvement results attributable to performance measurement systems.

Section B - Performance Objectives

Part III - Administration

III - 4 Procurement

Performance Objective #1 Management of Procurement Business Requirements

The Laboratory shall have systems in place that ensure Procurement programs are consistent with policies and procedures approved by DOE.
(Weight = 30%)

Criteria:	Performance Measures:
1.1 **System Evaluation** The Procurement organization conducts, documents, and reports annually, the results of a successful assessment of its purchasing system against established evaluation criteria. **(Weight = 30%)**	1.1.a **Assessing System Operations** The Procurement organization shall develop and submit a risk-based system evaluation plan to DOE and UC no later than October 1, 1997, for review and concurrence. The procurement system shall be assessed against system evaluation criteria as identified in the plan. In addition, an aggressive, cost effective management plan for resolution of system deficiencies and opportunities for process improvement shall be developed. Management of the results of the system assessment shall be evaluated. System deficiencies will include those identified by the Procurement organization, internal Laboratory organizations and external organizations. **(Weight = 30%)**

Basis for Rating:
Good: There is a sound, systematic approach, responsive to the primary purpose of the system evaluation. Cost benefit analyses and risk assessments are good when addressing deficiencies and/or opportunities for improvement. Implementation of remedial actions is appropriate and demonstrates responsible leadership in many to most cases.

Excellent: The requirements for a Good rating are met. There is a sound, systematic approach, responsive to the overall purpose of the system evaluation. In addition, cost benefit analyses and risk assessments are rated good to excellent when addressing deficiencies and/or opportunities for improvement. Implementation of remedial actions is sound and demonstrates responsible leadership in most cases.

Outstanding: The requirements for an Excellent rating are met. There is a sound, systematic approach, fully responsive to all the requirements of the system evaluation. In addition, cost benefit analyses and risk assessments are rated excellent when addressing deficiencies and/or opportunities for improvement. Implementation of remedial actions is sound and demonstrates strong leadership in most cases.

Performance Objective #2 Procurement System Cost Effectiveness and Efficiency

The Procurement organization shall ensure that business is being conducted at an optimum operational efficiency level.
(Weight = 40%)

Criteria:	Performance Measures:
2.1 **Pursuing Best Practices** The Procurement organization successfully uses benchmarking data and industry standards to identify targets of opportunity for improving operational efficiency related to service, cycle times and/or cost and pursues opportunities aggressively. **(Weight = 40%)**	2.1.a **Measuring Efficiency Gains** The Procurement organization will be measured against benchmarks or industry standards/practices in areas prescribed in the Value-Based Self-Assessment (VBSA) Model. The Procurement organization will establish final baselines, goals and gradients no later than December 1, 1997. **(Weight = 40%)**

Basis for Rating:
In partnership with DOE and UC, the Laboratory shall identify benchmarks/industry standards in each procurement area identified as a core requirement in the VBSA Model and establish and justify goals in pursuit of those standards. The Laboratory may propose gradients based on data other than benchmarks or industry standards if the Laboratory provides adequate support of other optimum operating levels.

Assumptions:
- The current core areas identified for pursuing cost effectiveness and efficiency under the VBSA Model are cycle time, process cost, effective competition, and product/service cost savings/avoidance.

- The weight of the measure will be distributed evenly among the applicable categories unless otherwise agreed to in coordination with DOE and UC.

Performance Objective #3 Customer Satisfaction

The Procurement organization shall maintain a focus on satisfying customer needs. **(Weight = 15%)**

Criteria:	Performance Measures:
3.1 **Customer Feedback** The Procurement organization listens and responds to its internal and external customers and stakeholders in a fair and open process that encourages dialogue and participation. **(Weight = 15%)**	3.1.a **Working Customer Needs** Based on the results of the FY97 customer survey, the Procurement organization shall select areas to work in partnership with its customers in order to effect customer-driven improvements in the procurement area. Improved customer satisfaction will be measured in comparison to a baseline established from the FY97 customer survey. The Procurement organization will submit areas for customer interaction and its plan of action by November 1, 1997. **(Weight = 15%)**

Basis for Rating:

Good: Identify customers (end users) and methods for customer interaction. Establish methods for determining customer satisfaction. Implementation plan with scheduled milestones are met. Documentation of results as outlined in the implementation plan verifies that customer satisfaction improvement goals for a meets expectations rating, as identified by the Laboratory in partnership with DOE and UC, have been achieved.

Excellent: The requirements for a Good rating are met. Documentation of results as outlined in the implementation plan verifies that customer satisfaction improvement goals for an Excellent rating, as selected by the Laboratory in partnership with DOE and UC, have been achieved.

Outstanding: The requirements for an Excellent rating are met and, in addition, documentation of results as outlined in the implementation plan verifies that customer satisfaction improvement goals for a Outstanding rating, as selected by the Laboratory in partnership with DOE and UC, have been achieved.

Note: The same customer survey that was employed in FY97 to measure the success of deployment of results will be employed in FY99.

Performance Objective #4 Professional & Social Responsibility

The Laboratory shall ensure that the procurement process is conducted in a professional and socially responsible manner.
(Weight = 15%)

Criteria:	Performance Measures:
4.1 **Supplier Performance** The Procurement organization shall manage its suppliers in such a manner as to ensure that the goods and services which they provide meet the Laboratory's requirements. **(Weight = 10%)**	4.1.a **Measuring Supplier Performance** The Procurement organization shall measure the performance of its key suppliers. Supplier performance will be measured from a baseline with goals and gradients agreed to by the DOE, UC, and the Laboratory no later than November 30, 1997. **(Weight = 10%)**

Basis for Rating:
Good: The Laboratory has identified its key suppliers and measures their performance against the baseline established for each of those suppliers.

Excellent: The requirements for a Good rating are achieved and, in addition, supplier performance improvement goals for an Excellent rating, as selected by the Laboratory in partnership with DOE and UC, have been achieved.

Outstanding: The requirements for an Excellent rating are achieved and, in addition, supplier performance improvement goals for a Outstanding rating, as selected by the Laboratory in partnership with DOE and UC, have been achieved.

Assumptions:
Contract Administration is assessed annually by each Laboratory under Performance Measure 1.1.a.

Criteria:	**Performance Measures:**
4.2 **Socioeconomic Subcontracting** The Procurement organization shall support and promote socioeconomic subcontracting programs. **(Weight = 5%)**	4.2.a **Meeting Socioeconomic Commitments** The percentage of actual subcontract dollar obligations (not subcontract face value) in the following 4 categories will be compared against goals negotiated for FY98. (a) Small Business (b) Small Business Set-Asides (c) Small Disadvantaged Business (d) Women-Owned Small Business The Procurement organization will propose and provide supporting rationale and statistical support for socioeconomic goals. **(Weight = 5%)**

Basis for Rating:
It is recognized that pursuit of cost effectiveness and best business practices may impact on the establishment of socioeconomic goals and/or on the final achievement of such goals. Consideration will be given to this impact during forecasting and mid-year updates of goals and during evaluation of self assessments.

Good: Meeting all goals with consideration given to changes in funding profiles, changes in forecast, deletion of requirements, etc., should goals not be met.

Excellent: Exceeds three of the four goals and meets the fourth goal. Consideration will be given to such factors as awards/recognition, pilot program participation, or other support for DOE socioeconomic programs when the Laboratory is borderline to meeting a goal that leads to a rating of Excellent.

Outstanding: Exceeds all goals. Consideration will be given to such factors as awards/ recognition, pilot program participation, or other support for DOE socioeconomic programs when the Laboratory is borderline to meeting a goal that leads to a rating of Outstanding.

Assumptions:
Obligations qualifying in more than 1 category may be counted in more than 1 category, e.g., Small Business and Small Business Set-Asides.

The purchasing base for purposes of this measure is all obligations incurred during the fiscal year period, excluding: (1) Subcontracts with foreign corporations which will be performed entirely outside of the United States; (2) Utilities (gas, sewer, water, steam, electricity and regulated telecommunications services); (3) Federal Supply Schedule Orders when all terms of the GSA contract apply; (4) GSA Orders when all terms of the GSA contract apply; (5) Agreements with DOE management and operating contractors and University campuses; (6) Federal government and DOE mandatory sources of supply; Federal prison industries, industries of the blind and handicapped; and (7) Procurement card purchases.

The schedule for submitting and negotiating goals will be followed per Appendix D.

Section B - Performance Objectives

PART III- Administration

III - 5 Property

Property Management will employ the Property Performance Assessment Model (PPAM) for FY98. Each Property Management organization will finalize its final assessment plan with DOE and UC by September 30, 1997. This plan will cover performance thresholds, performance ranges (gradients), specific scoring criteria, frequency of reporting, and frequency of scoring.

In this Model points are used to determine the score for each activity. Weights and the corresponding points are shown below at the Objective, Criteria, and Measure levels. At the Basis for Rating level total possible points for each activity are shown below. Overall ratings will be based on the following (where a total weight of 100% is equal to 500 points):

>= 475 Outstanding
>= 450 Excellent
>= 400 Good
>= 352 Marginal
<352 Unsatisfactory

The Adjectival Rating and Contractual Score will be assigned using the Property Management Scoring Table (see Exhibit I).

Performance Objective #1 Accountability for Equipment and Sensitive Property, and Precious Metals

The Laboratory shall ensure accountability for equipment and sensitive personal property and precious metals.
(Weight = 45%/Total Points = 225)

Criteria:	Performance Measure:
1.1 **Accountability for Equipment and Sensitive Property** The Laboratory shall conduct successful personal property inventories as established in its inventory plan. **(Weight = 25%/Total Points = 125)**	1.1.a **Property Accounted For** The percentage of personal property accounted for, as described in the approved inventory plan, will be measured. **(Weight = 25%/Total Points = 125)**

Basis for Rating:

The LANL Property Performance Assessment Plan (see Exhibit II), provides the activities to be measured, point value for each activity, frequency of reporting, and performance ranges (gradients) which have been agreed upon by DOE, UC, and the Laboratory.

Criteria:	Performance Measure:
1.2 **Precious Metals Inventory** The Laboratory shall conduct successful precious metals inventories as established in its inventory plan. **(Weight = 5%/Total Points = 25)**	1.2.a **Precious Metals Inventory Results** The percentage of precious metals accounted for, as described in the approved inventory plan, will be measured. **(Weight = 5%/Total Points = 25)**

Basis for Rating:

The LANL Property Performance Assessment Plan (see Exhibit II), provides the activities to be measured, point value for each activity, frequency of reporting, and performance ranges (gradients) which have been agreed upon by DOE, UC, and the Laboratory.

Criteria:	Performance Measure:
1.3 **Identification of Items Subject to Inventory** The Laboratory will ensure personal property items which are subject to inventory are accurately identified. **(Weight = 15%/Total Points = 75)**	1.3.a **Accuracy of Identification** The percentage of items accurately identified in the property database will be measured. **(Weight = 15%/Total Points = 75)**

Basis for Rating:

The LANL Property Performance Assessment Plan (see Exhibit II), provides the activities to be measured, point value for each activity, frequency of reporting, and performance ranges (gradients) which have been agreed upon by DOE, UC, and the Laboratory.

Performance Objective #2 Stewardship Over Personal Property

The Laboratory shall ensure that both stewardship and custodianship for personal property is maintained.
(Weight = 20%/Total Points = 100)

Criteria:	Performance Measure:
2.1 **Organizational Stewardship and Individual Custodianship** The Laboratory will ensure organizational and individual accountability (stewardship and custodianship, respectively) for property. **(Weight = 20%/Total Points = 100)**	2.1.a **Timeliness of Assignment** The accountable individual is identified for equipment and sensitive property, and the timeliness of such identification is measured. **(Weight = 20%/Total Points =100)**

Note: At LANL, only individual responsibility applies.

Basis for Rating:

The LANL Property Performance Assessment Plan (see Exhibit II), provides the activities to be measured, point value for each activity, frequency of reporting, and performance ranges (gradients) which have been agreed upon by DOE, UC, and the Laboratory.

Performance Objective #3 Vehicle Utilization

The Laboratory shall have a program to manage its vehicle fleet.
(Weight = 5%/Total Points = 25)

Criteria:	Performance Measure:
3.1 **Fleet Management** The Laboratory shall manage its fleet to ensure appropriate vehicle utilization. **(Weight = 5%/Total Points = 25)**	3.1.a **Vehicle Utilization** The Laboratory shall measure the percentage of total eligible vehicles meeting local utilization criteria. **(Weight = 5%/Total Points = 25)**

Basis for Rating:

The LANL Property Performance Assessment Plan (see Exhibit II), provides the activities to be measured, point value for each activity, frequency of reporting, and performance ranges (gradients) which have been agreed upon by DOE, UC, and the Laboratory.

Performance Objective #4 Information to Improve/Maintain Processes (Systems Evaluation)

The Laboratory ensures that Property Management programs are consistent with policies and procedures approved by DOE.
(Weight = 15%/Total Points = 75)

Criteria:	Performance Measure:
4.1 **Self-Assessment of Policies and Procedures** The Laboratory shall plan, conduct, document, and report annually, the results of a successful property management system evaluation. **(Weight = 15%/Total Points = 75)**	4.1.a **Assessing Support Processes** The property processes shall be measured against identified system evaluation criteria established in the plan. **(Weight = 15%/Total Points = 75)**

Basis for Rating:

The LANL Property Performance Assessment Plan (see Exhibit II), provides the activities to be measured, point value for each activity, frequency of reporting, and performance ranges (gradients) which have been agreed upon by DOE, UC, and the Laboratory.

Assumptions:

- Disposal Process Defined: Property numbered items declared excess by custodian through final disposition by JCNNM.

Performance Objective #5 Customer Alignment

The Laboratory shall ensure that there is a property management program for identifying and evaluating customer needs and for building and maintaining positive customer relations. **(Weight = 5%/Total Points = 25)**

Criteria:	Performance Measure:
5.1 **Monitoring Customer Alignment** The Property Management organization shall ensure that the property management programs are responsive to customer expectations. **(Weight = 5%/Total Points = 25)**	5.1.a **Aligning Customer Expectations** The Laboratory will have processes in place to monitor customer expectations of property management tools and products with regard to ease of use, timeliness, accuracy, and certainty. **(Weight = 5%/Total Points = 25)**

Basis for Rating:

The LANL Property Performance Assessment Plan (see Exhibit II), provides the activities to be measured, point value for each activity, frequency of reporting, and performance ranges (gradients) which have been agreed upon by DOE, UC, and the Laboratory.

Assumptions:

-A VOC Program will be used to gather input regarding customer expectations and needs regarding Property Management practices.

Performance Objective #6 Balancing Performance and Cost

The Laboratory ensures that property is managed appropriately to balance performance and cost. **(Weight = 10%/Total Points = 50)**

Criteria:	Performance Measure:
6.1 **Performance/Cost Efficiency** The Laboratory shall ensure that property processes/products are provided in the most cost efficient manner while maintaining desired levels of performance. **(Weight = 10%/Total Points = 50)**	6.1.a **Measuring Cost Efficiency/ Effectiveness** The Laboratory shall measure its ability to effectively balance property management costs and performance. **(Weight = 10%/Total Points = 50)**

Basis for Rating:
The LANL Property Performance Assessment Plan (see Exhibit II), provides the activities to be measured, point value for each activity, frequency of reporting, and performance ranges (gradients) which have been agreed upon by DOE, UC, and the Laboratory. The matrix provided below will used to score the selected activities.

GRADIENT

	Performance Level			
Cost Vs Baseline Plan Developed Each Year	**Higher Gradient or Outstanding**	**Same Gradient**	**Lower Performance and Not Less Than Good**	**Lower Performance and/or Less Than Good**
Less Cost	Outstanding	Excellent	Good	Marginal
Same Cost	Excellent	Good	Marginal	Unsatisfactory
More Cost	Good	Marginal	Unsatisfactory	Unsatisfactory
More Cost More Requirements	**Renegotiate Performance Gradients for Critical Activities**			

EXHIBIT I

PROPERTY MANAGEMENT
SCORING TABLE

PPAM Points Earned	Translation to Appendix F Contractual Scoring	Adjectival Rating
493-500	98	**Outstanding**
484-492	95	
475-483	92	
469-474	88	**Excellent**
460-468	85	
450-459	82	
433-449	78	**Good**
417-432	75	
400-416	72	
384-399	68	**Marginal**
368-383	65	
352-367	62	
336-351	58	**Unsatisfactory**
320-335	55	
304-319	52	

INSERT COLOR COPY OF

EXHIBIT II

LOS ALAMOS NATIONAL LABORATORY

PROPERTY PERFORMANCE ASSESSMENT PLAN

(LANLPPAM.PDF)

Section C - Assessment and Appraisal

Part I - UC Self-Assessment and Rating Process

- A comprehensive and balanced peer review process will be conducted by the Contractor for the Laboratory through the University President's Council on National Laboratories.
- The UC Management team evaluates operations and administration systems for each Laboratory in each functional area (Laboratory Management, Environment Restoration and Waste Management, Environment, Safety & Health, Facilities Management, Safeguards and Security, Financial Management, Human Resources, Information Management, Procurement, and Property Management) on the basis of established performance measures.
- Weighting of points for each area is established at the beginning of each annual evaluation cycle. Numerical scores expressed as percentages are assigned to each functional area based upon the performance assessment ratings listed below. These percentages multiplied by the maximum points allocated for each functional area result in the total points for that area.UC establishes a aggregate "rating" for each Laboratory based on evaluation of each functional area - ratings for Science and Technology and Operations and Administration Systems are averaged together.

UC Management Team

Evaluation of Operations and Administratio Systems

Laboratory Management	50 pts
Environmental Restoration and Waste Management	50 pts
Environment, Safety and Health	135 pts
Facilities Management	50 pts
Safeguards & Security	50 pts
Financial Management	33 pts
Human Resources	33 pts
Information Management	33 pts
Procurement	33 pts
Property Management	33 pts

Evaluation of Operations & Administration Systems
Total 500 Points

+

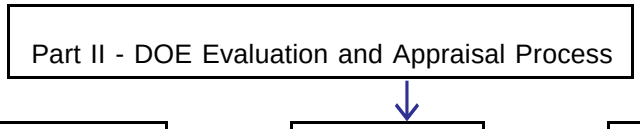
President's Council on National Laboratorie

Evaluation of Science and Technology

500 pts

Evaluation of Science & Technology
Total 500 Points

UC Self-Assessment Presentation to DOE



DOE Evaluation and Business Management Integrated Oversight Process → DOE Appraisal Process ← Evaluation & Appraisal of Science & Technology by DOE

Evaluation of Operations & Administration Systems

Evaluation of Science and Technology

Laboratory Management	50 pts
Environmental Restoration and Waste Management	50 pts
Environment, Safety and Health	135 pts
Facilities Management	50 pts
Safeguards & Security	50 pts
Financial Management	33 pts
Human Resources	33 pts
Information Management	33 pts
Procurement	33 pts
Property Management	33 pts

500 pts

Evaluation of Operations & Administration Systems + Total 500 Points

Evaluation of Science & Technology Total 500 Points

C.O.'s Evaluation of Contractor's Self-Assessment and Report

Part III - Performance Appraisal

Example

Science & Technology	Excellent			435 pts
Operations & Administration Systems	Rating (*See Table 1)	% x	Max pts =	Pt Score
Laboratory Management	Good	75% x	50 =	38 pts
Environmental Restoration and Waste Management	Good	75% x	50 =	38 pts
Environment, Safety & Health	Good	75% x	135 =	101 pts
Facilities Management	Good	75% x	50 =	38 pts
Safeguards & Security	Good	75% x	50 =	38 pts
Financial Management	Good	75% x	33 =	25 pts
Human Resources	Excellent	88% x	33 =	29 pts
Information Management	Good	75% x	33 =	25 pts
Procurement	Outstanding	98% x	33 =	37 pts
Property Management	Good	75% x	33 =	25 pts
Total of Operations & Administration Systems				394 pts
Total of Science & Technology and Operations & Administration Systems				829 pts

Senior Management Salary Increase Authorization Multiplier Table

Total Points	Numeric Equivalent
900 - 1000 points	1.50
800 - 899 points	1.25
700 - 799 points	1.00
0 - 699 points	.75

Scientists & Engineers Cost-to-Market (for example) 4.80%

Senior Management Merit Pool Percentage (4.80% x 1.25) = 6.00%

Table 1

DOE- UC Rating Adjectives

Numerical Range	Adjectival Description	Definition
100-90	Outstanding	Significantly exceeds the standard of performance; achieves noteworthy results; accomplishes very difficult tasks in a timely manner
89-80	Excellent	Exceeds the standard of performance; although there may be room for improvement in some elements, better performance in all other elements offset this
79 - 70	Good	Meets the standard of performance; assigned tasks are carried out in an acceptable manner - timely, efficiently, and economically. Deficiencies do not substantively affect performance.
69- 60	Marginal	Below the standard of performance; deficiencies are such that management attention and corrective action are required.
< 60	Unsatisfactory	Significantly below the standard of performance; deficiencies are serious, and may affect overall results, immediate senior management attention, and prompt corrective action is required.

Note: This set of adjectival ratings is being phased in for FY98.

EXCEPTION TO SF 30, APPROVED BY NARS 5/79

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT

1. CONTRACT ID CODE	PAGE OF PAGES
	1 1

2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE DATE	4. REQUISITION/PURCHASE REQ. NO.	5. PROJECT NO. *(If applicable)*
M444	See Block 16C		

6. ISSUED BY CODE

U.S. Department of Energy
Albuquerque Operations Office
Contracts and Procurement Division
P.O. Box 5400
Albuquerque, NM 87185-5400

7. ADMINISTERED BY *(If other than Item 6)*

8. NAME AND ADDRESS OF CONTRACTOR *(No., street, country, State, and ZIP Code)*

The Regents of the University of California
Office of the President, Laboratory Administration
1111 Franklin Street, 5th Floor
Oakland, CA 94607-5206

( )

9A. AMENDMENT OF SOLICITATION NO.

9B. DATED *(SEE ITEM 11)*

x

10A. MODIFICATION OF CONTRACT/ORDER NO.
W-7405-ENG-36/M440

10B. DATED (*SEE ITEM 13*)
October 1, 1997

CODE FACILITY CODE

11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS

The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers is extended. is not extended.

Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended by one of the following methods:

(a) By completing Items 8 and 25, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. .If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.

12. ACCOUNTING AND APPROPRIATION DATA *(If required)*

13. THIS ITEM APPLIES ONLY TO MODIFICATIONS OF CONTRACTS/ORDERS ,
IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.

( ) A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: *(Specify authority)* THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN CONTRACT/ORDER NO. IN ITEM 10A.

B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES *(such as changes in paying office, appropriation data, etc.)* SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103 (b).

x C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:
Clause 5.1 Contract Modifications

D. OTHER *(Specify type of modification and authority)*

E. IMPORTANT: Contractor is not, X is required to sign this document and return _____3___ copies to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION *(Organized by UCF section headings, including solicitation/contract subject matter where feasible.)*
1. Appendix F dated 10/01/97 is hereby revised to reflect the mid year changes. Changes were made to the functional areas of Laboratory Management, ERWM, ES&H, Safeguards and Security, Human Resources, Finance and Property. Appendix F revised as of 05/15/98 is attached in its entirety.

Except as provided herein, all terms and conditions of the document referenced in Item 9A or 10A, as heretofore changed, remains unchanged and in full force. and effect.

15A. NAME AND TITLE OF SIGNER *(Type or print)*		16A. NAME AND TITLE OF CONTRACTING OFFICER *(Type or print)*	
Sandra M. Vinson, Associate Director, Contracts Management University of California, Laboratory Administration Office		Tim Coalson, Contracting Officer Contracts and Procurement Division DOE Albuquerque Operations Office	
15B. CONTRACTOR/OFFEROR _____ *(Signature of person authorized to sign)*	15C. DATE SIGNED	16B. UNITED STATES OF AMERICA BY _____ *(Signature of Contracting Officer)*	**16C. DATE SIGNED**